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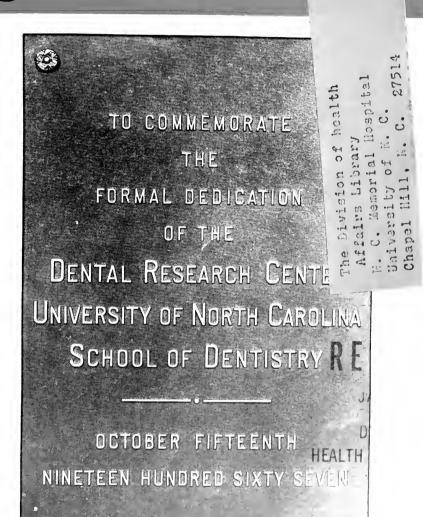
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VOLUME 51

NUMBER I

JANUARY, 1968



N. C. D. S. Directory, 1968



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The Dentists' Supply Company of N.Y., York, Pennsylvania

#### THE JOURNAL

#### of

#### The North Carolina Dental Society

(A Constituent of the American Dental Association)

NUMBER 1

Page

#### **OFFICERS** VOLUME 51 1967-1968 JANUARY, 1968 GEORGE F. KIRKLAND, JR. President Durham COLIN P. OSBORNE, JR. President-Elect Lumberton President's Page ......Kirkland JAMES H. LEE Editorials ..... Vice President Dental Identification of Plane Crash Goldsboro Victims ......Carpenter C. W. POINDEXTER Can You Afford to Be Without It?......Austin 13 Secretary-Treasurer Greensboro DISTRICT EDITORS C. W. CANROBERT, JR. First District Conover KENNETH D. OWEN Group Insurance Plans Sponsored by Second District Charlotte General News ...... 85 RICHARD M. FIELDS Third District Pleasant Garden FREDERICK G. HASTY COVER PICTURE Fourth District Favetteville Pictured on the cover is the dedicatory plaque on the new \$1.3 million dollar Dental Research Center JAMES A. PRIVETTE on the University of North Carolina Campus. For Fifth District the full story of the dedication see page 19. Kinston

Managing Editor: Andrew M. Cunningham......Raleigh

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# In grateful appreciation this issue is dedicated to . . .



G. Shuford Abernethy, D.D.S., F.A.C.D. Hickory, N. C.

We of the First District proudly dedicate this issue of The Journal to Dr. G. Shuford Abernethy, a man both loved and respected by his colleagues and townspeople.

Attending Lenoir-Rhyne College, The University of North Carolina, and graduating Omicron Kappa Upsilon from Atlanta Southern Dental College in 1936, the Hickory native has honored his community and his profession with many years of diligent service. He served nine years as a member of the North Carolina State Board of Dental Examiners, the last two as president. Currently he is vice president of The Dental Foundation of North Carolina.

These duties, moreover, are complemented by his talented civic leadership ability. Shuford has been president of the Rotary Club, school board member, and church elder. Presently he is a member of the Board of Directors of the North State Academy.

Though burdened with the above activities, Shuford greets all with a winning smile and vigorous handshake and it is for all of these reasons we love him.



# The President's Page

M UCH has happened since the district meetings. A large delegation from North Carolina attended the A.D.A. convention in Washington, D. C. and as your official representative I would like to discuss a few items that may be of interest to you.

As most of you know, there was much discussion and debate at some of the district meetings about resolutions dealing with expanding the function of dental auxiliary personnel and especially with a part of Resolution 22 which would ask state boards of dental examiners to consider recommending the removal of limitations in the state dental practice acts "which restrict the practicing dentist in the exercise of his professional judgment in the utilization of the services of dental hygienists and dental assistants."

Three of the district societies went on record and so informed the N. C. delegates as disapproving this part of the resolution since they felt that the state dental board of

examiners should still remain in control of what functions should and could be delegated to auxiliaries. Most of the dentists felt that this was leaving too much up to the practicing dentist and that it could be misused. As one dentist remarked, "dental assistants with no more than two or three weeks training could be filling teeth if the practicing dentist were left to exercise his own professional judgment."

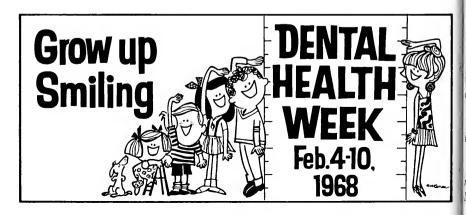
At the A.D.A. meeting in Washington there was much debate in the reference committee on Dental Education and Hospitals and also on the floor of the House of Delegates on these issues. When the final vote was recorded the resolution dealing with expanding the functions of auxiliary personnel was generally approved as first presented, with the exception of the objectionable part of Resolution 22. All of the North Carolina delegates did not vote unanimously on all issues but I think as a rule they

represented the wishes of the Society.

The hospitality room furnished by the N. C. Dental Society for its members was a great success. Every evening we had many members, their friends and some distinguished guests make use of the room. I might add that toward the end of the meeting both your executive secretary and your president were completely fatigued not to mention our wives. I think, however, this is one of the nicest things that we do for our members even though it may be a little rough on the hosts.

During the meeting until voting time Thursday morning, the last day of the meeting, there was some very active campaigning for both candidates running for President-Elect, Dr. Zappe from Texas and Dr. McGuirl from Rhode Island, Dr. Zappe highlighting his bid by throwing a big party one evening and Dr. McGuirl by entertaining all delegates at breakfast the following morning. It turned out to be a very close contest, similar to the one we had last May at Pinehurst, with the trustee from Rhode Island coming out on top. Dr. McGuirl has already been invited and has agreed to be on our program at the State meeting in 1968.

The A.D.A. meeting in Washington was interesting and exciting, needless to say though, after a week I was happy to get back to North Carolina.



## **Editorials**

#### THAT DENTAL CAVITY'S ON THE HIP

From the Charlotte Observer, November 5, 1967

One of the resident thinkers at the University of North Carolina's dental school told the American Dental Association that the goal of preventive dentistry should be to eliminate the need for dentists.

Reports on his remarks don't explain the scientific steps he urges to reach that goal. They are largely given over to some economic ideas which he explained in great detail to the ADA.

The gist of these ideas seems to be that before preventive dentistry can phase itself out as a necessary science, preventive dentists must first phase themselves into the fatter incomes collected by their specialist colleagues.

The fiscal success of practitioners who build those memorial bridges from molar to incisor, or who wire up a teen-ager's teeth for beauty, is apparently discouraging the simpler practice of clean, drill and fill.

So preventive dentistry's answer to this problem would be: Don't join 'em, match 'em. This can even

be reduced to a simple formula.

The average dental practitioner grosses \$36,000 a year. So to reach that level without specializing, the preventive dentist need only charge \$20 an hour for a 40-hour week, take in his \$36,000 and still have the average six weeks off each year for whatever dentists do when their nurses say, "Sorry, the doctor won't be in this week."

By paying attention to this simple formula, preventive dentistry won't have to worry about losing its would-be staff men to higher paying bridge-building, etc. They could all be in their offices 46 weeks out of the year busily striving to phase themselves out as necessary features of the American scene.

But if they really want to hurry the job, they can forget about cleaning, filling or even fluoridating. Just let them push the economics of that simple formula a little further and that old slogan of "see your dentist twice a year" may be enshrined along with "the automobile will never replace the horse."

#### THE SPOKESMAN

"Of the painter we say that he will paint reins, and he will paint a bit?

Yes.

And the worker in leather and brass will make them?

Certainly.

But does the painter know the right form of the bit and reins? Nay, hardly even the workers in brass and leather who make them; only the horseman who knows how to use them—he knows their right form.

Most true.

And may we not say the same of all things?

What?

That there are three arts which are concerned with all things; one

which uses, another which makes, a third which imitates them?"

And which would Plato consider "the resident thinkers" — certainly not the horseman.

When will the practicing dental profession have its fill and come forth with complete rejection of imitative spokesmen?

# HEY—WHAT'S GOING ON HERE!!!

Can you answer that question — broad as it is — pertaining to the governing body of dentistry? Who

speaks for you? Who makes the rules? Who is the ADA? Who are the educators and what role do they play? Who benefits from the everincreasing capital of organized dentistry? Are empires being built for the few? Are the patients and profession being served in proportion to the increased demand for resources? You, the private practitioner, the strength of dentistry, should make sure you are aware of the answers. They pertain to your daily practice. Make sure your delegates know your thoughts. Speak up and then be sure their voice is heard and not silent.

#### **CONGRATULATIONS!!!**

Headlines recently in Illinois.

Press-Record
Granite City, Ill.

Illinois Fluoridation Will Benefit Thousands Here, Millions in State

Signing of the statewide fluoridation bill by Gov. Kerner is a great victory for the people of Illinois and for the cause of better health. Etc.

This is the type press coverage we need in N. C. Request, demand, and support this type leadership of your elected officers.



On July 19, 1967 a small plane and a Piedmont airliner collided near Hendersonville and 82 people died. Rescue operations at the scene of the crash are pictured above.

# Dental Identification of Plane Crash Victims

by Joseph P. Carpenter, D.D.S.

PIEDMONT Airlines Flight 22, a Boeing 727, took off from Asheville Airport with 74 passengers and a crew of five. Minutes later, a mid-air collision involving a twinengine Cessna 310 carrying three persons was history. At high noon on Wednesday, July 19, 82 persons went to their mangled death.

Word of the crash spread over the area in a matter of minutes through numerous eye-witnesses. Local hospitals went on emergency procedure immediately, but it was not long until it was apparent that there were no survivors, and the medical facilities soon relaxed.

#### **Dental Society Volunteers**

With the arrival of the Federal Aviation officials, the Piedmont

Airline officials, and the FBI Human Factors team, the chaos began to become organized. The National Guard Armory was secured for a morgue, and the FBI set up headquarters there. Rescue Squad ambulances and other emergency vehicles moved the bodies of the 82 victims in numbered zippered plastic bags from the scene of the crash to two refrigerator truck trailers. This was on Thursday, and it was at this point that the Henderson County Dental Society began its function in this emergency. Society President Francis A Buchanan contacted the FBI and offered the services of the membership. The FBI team had three pathologists for autopsies, but no dental member. Beginning on Friday morning and continuing until identification was complete Sunday about noon, nine local dentists contributed more than 60 hours of time.

#### Team Effort

The dental team assisted the pathologists in the examination of each body, and also completed a standard government dental examination chart for each victim that had any dental structure left. Victims had fallen from the plane in mid-air; one fell through the roof of a house; another landed on the median of Interstate 26. These bodies were badly mangled but were not burned as were those that remained in the aircrafts. The task of locating any dental structures at all was difficult, particularly in the burned victims. Frequently, all that remained was half a mandible or maxilla, and in some cases, there was not a head at all.

#### The Dental Record

As dental records from the home towns came in, the process of matching the known dental record with the victim's examination chart was accomplished.

The cross section of known dental records that we received to work with ranged from the sublime to the ridiculous!

In the better cases, we received a full series of X rays, or perhaps just bite-wings, as well as a chart showing the location and types of restorations, prostheses, and missing teeth. Some of the records included study models. In the worst instances we received a chart of coded notations with no X rays and no diagram. Not any record at all could be located by the FBI for some of the victims.

#### Positive Identification

The following cases illustrated some difficulties encountered:

Examination of one badly burned body revealed only a single molar crown with an occlusal amalgam restoration, and only the condyles of the mandible remained. The crown appeared to be a lower left second molar, and the body appeared to be that of a teenaged girl, Known record included X rays of two girls with molar occlusal restorations. The specimen crown was taken to a local dental office and X-rayed; the outline of the amalgam was irregular enough to be distinctive and matched the restoration in the lower left second molar of one of the known dental records.

An accurate description of prostheses in the known dental record as well as the examination chart is essential. One body had a horseshoe cast gold upper partial denture replacing certain teeth and with a clasp on the left central incisor. This very unusual design was quite distinctive, and it was rewarding to find a known dental record with a stone model showing this identical prostheses.

One victim, a young lady, had just had orthodontic treatment completed with the extraction of the first bicuspids, and still wore bands on the lower molars and a lingual arch wire as a retainer. Models sent by the orthodontist were a means of identification.

# Dental Findings Complement Other Observations

Dental information worked together with other factors in many cases. Two bodies were determined to be edentulous, and the pathologists had narrowed them down to two older women, but which was which? Medical records disclosed that one had had an appendectomy and the other had not; therefore, by this means a positive identification could be made.

Many means of identification are employed by the FBI. Visual identification by friends or kin was possible in some cases; fingerprints were obtained by these experts sometimes in unbelievably difficult circumstances, and matched with prints on record or latent prints obtained from the victim's car or home; footprints were compared to hospital records; jewelry, clothing, keys, belt size and design, and location of the body within the wreckage all were utilized. The pathologist could locate scars, moles, sites of bone fractures noted in medical histories, internal diseases such as arteriosclerosis and kidney disease,



DR. CARPENTER

and determine whether a woman had had children. In this particular accident head injuries were very severe, so the dental examination was not the main means of identification in most of the cases. But in a large enough number to make us feel that the disagreeable task was worthwhile, dentistry played a significant role.

#### A Direction

Procedures for setting up dental identification services in cases of a large number of victims:

- 1. Maintain as much continuity as possible by using a rather small number of dentists, preferably using those with experience or training as leaders.
- 2. A few simple items of equipment will suffice: Mouth mirror and explorer, scalpel, toothbrush, water or hydrogen peroxide for cleaning tooth surface, rubber gloves, lab coat, aerosol airfreshener or deodorizer to combat bad odor, X-ray view box, and a light source.
- 3. Record what dental structures, if any, were lost in the accident;

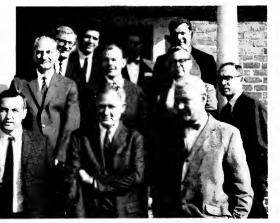
then proceed with a detailed recording of the dental findings in the remaining structures. No detail should be overlooked. If the sex and approximate age of the victim can be determined, this should be recorded on the dental chart to eliminate wasted effort in comparing this chart with known records that it could not possibly match.

#### An Obligation to Modern Society

With the increase in violent deaths that mark our modern era, it will behoove each of us to fulfill our responsibility to our patients by maintaining adequate records of their dental structures. And if the FBI calls some day to request your dental record of some particular

patient, it will be helpful if you will take a few minutes to provide your colleague with a means of decoding your notes, or perhaps a composite chart drawn up from your records, and by all means write a note about any distinguishing features that come to mind about that person's dental condition. Teeth should be identified by name, or else the numbering system used should be noted. In many cases a small detail that seems insignificant in itself may mean the difference between the dental team saying "this body is A. E. Jones" or "this body may be that of A. E. Jones."

513 Sixth Ave., West Hendersonville, North Carolina



THE COASTAL STUDY CLUB sponsored a two-day seminar on molar endodontics this Fall in New Bern. Those attending were: Front row (I to r): Bert B. Warren, James M. Zealy, Lewis P. Bratton. Second row (I to r): C. C. Gooding, W. A. White, T. C. Boykin, P. D. Sanders. Third row (I to r): R. Hogan Gaskins, Jr., F. H. Howdy, C. T. Barker, and Thomas P. Mullaney of Lexington, Kentucky, clinician.

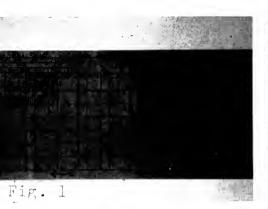
# Can You Afford to Be Without It?

Edward U. Austin, D.D.S.

W ITH the mounting paper work forced on the average dental practice, every dentist in private practice is going to be confronted with an important decision in the near future. This decision will be to increase office personnel or find some other method of solving this problem. There are always problems when additional personnel is hired and, of course, these problems have been compounded by a dramatic shortage of qualified people available. One method of solving this problem is by proper utilization of the computer.

Many dentists are reluctant to consider data processing because they consider it new, expensive, and inappropriate for the dental office. The computer is certainly not new because the Chinese were using the abacus, a form of computer, a thousand years before Christ. Even before the abacus, man was computing with his fingers. If the computer is properly programmed, it can provide more information and services at much less expense than an additional person could provide. A properly programmed system for the professional man should provide a daily ledger, monthly aged accounts trial balance, a practice analysis, monthly itemized statement with an insurance form, positive cash control, and protection of the accounts receivable. A system that could provide these services and give the professional man control over the payments received at a reasonable cost, is where the search began. After investigating a large number of billing systems, it was found that Management Systems of the South could best supply the needs as outlined. It has proven to provide all of the criteria set forth, save the office personnel approximately two and one half hours a day, and gives positive control over accounts receivable.

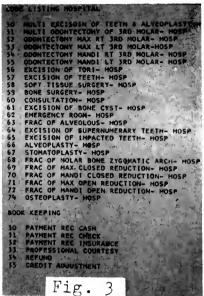
This system was programmed for the medical and dental office after extensive study of the needs. These needs differ from commercial and financial concerns to some degree. It is true the doctor needs controls but not to a point of excercising unnecessary pressure on patients who have agreed on a payment plan. The system should leave the personnel free to do productive and not duplicating wasting valuable time posting to ledger cards or maintaining a daily log or ledger sheet. However, a ledger card should be in the office at all times so financial records can be discussed intelligently with the patient any time the occasion may arise. With this system, a

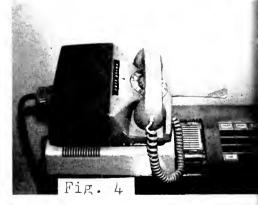


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CODE FOR ORS. AUSTIN & PORTER
OFFICE:

Q1 EXCISION OF TOOTH
O2 X RAY
O4 MULTIPLE EXCISION OF TEETH
O5 DOONTECTOMY MAX, RT 3RD MOLAR
O6 DOONTECTOMY MAX LT 3RD MOLAR
O7 QUONTECTOMY MANDIBULAR RT 5RD MOLAR
O8 DOONTECTOMY MANDIBULAR RT 5RD MOLAR
O9 ALVEOPLASTY
10 POST OPERATIVE TREATMENT
11 BIOPSY
12 SOPY TISSUE SURGERY
14 EXCISION OF RESIDUAL ROOTS
15 BONE SURGERY
15 INCISION OF BONE CYST
16 FRENECTOMY
17 EXCISION OF BONE CYST
18 FRENECTOMY
19 EXCISION OF BONE CYST
10 SUNGICAL EXPOSURE OF IMPACTED TEETH
21 SUTURING OF LACERATIONS
22 SEQUESTRECTOMY
23 CLOSURE OF ORAL ANTRAL FISTULAS
24 APIECECTOMY
25 REDUCTION OF DISLOCATION OF JAW
27 MOMENT OF TEMPOROMANDIBULAR JOINT DYSFUNCTI
28 EXCISION OF IMPACTED SUPERNUMERARY TOOTH
29 EXCISION OF IMPACTED SUPERNUMERARY
20 STENYLITIS
34 MCMENT OF SENDICATION
42 SALIVARY GLAND SURGERY
44 OSTENYLITIS
45 SURGERY
46 OFFICE VISIT
47 CONSULTATION
48 FRACTURE OF MANDIBLE CLOSED REDUCTION
48 MISCELLAMEGUS

FIG. 2
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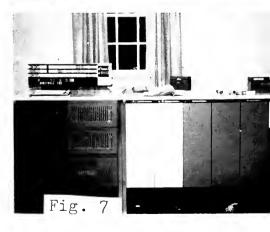
ledger card on each family is kept in an alphabetical file. Each time a member of the family comes for services, the ledger card is pulled and attached to the patient's record. After the services are performed, the charges are entered on the card (See Fig. 1) with a pre-established code (See Fig. 2 & 3) for the service. This card is returned with the patient's record to the business office. Should the patient pay at the time of the visit, an entry of the payment is posted to the ledger card. By the end of the day, every patient seen has a charge posted; every payment received has been posted including those payments that came by mail. A total of payments received on a day must agree with the bank deposit for that day. A total of all charges for the day is made. These totals are used as the control to balance with the com-

nuter. The next morning the information on the ledger cards is transmitted over a special data set (See Fig. 4) from the office. It is received (See Fig. 5) at Management Systems of the South by a data receiving set which activates the IBM 026 Key punch (See Fig. 6). This operation requires ten to fifteen minutes of time to transmit a day's work. The transmitter operates like a ten key adding machine, and any person who is capable of doing other office duties can learn to operate it in a few minutes. If the person responsible for the bookkeeping is absent or has to be replaced, the books can be kept easily efficiently by any other personnel without interruption of office routine. The information received from this transmission is fed into a computer (See Fig. 7 & 8), and a daily log or ledger sheet (See Fig. 9) is back each afternoon balanced with the work done on the previous day. The system provides a printed daily log, posted ledger cards, and sends statements (See Fig. 10) which saves the office secretary at least fifty hours a month for other duties. It is needless to mention the mental and physical strain that is relieved at statement time. It must be remembered that, should a disaster destroy the office records, there is always a tape at the computer center with the accounts receivable. This feature has been valuable in locating misplaced records also. Should it be necessary to defend your income with the Internal Revenue Service, these balanced ledger sheets are far superior to the hand written daily log.

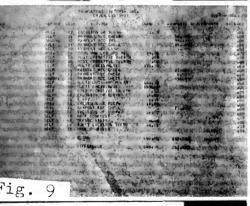
The aging of accounts receivable is desirable because it provides a method of control to increase col-

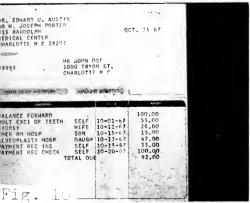








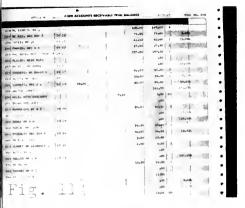




lections. With the help of the aged accounts trial balance, it is possible to follow each account accurately and prevent most of these from becoming delinquent (See Fig. 11). It might be possible for the office personnel to prepare an aged accounts trial balance monthly, but it would be so time consuming that it would not be practical. Data Processing can lay out all the necessary information. The entire accounts receivable can be worked in the period of time it takes the office personnel to work the "A's" when they are looking at the ledger cards to determine who is behind in payments. This alone could pay for the system by increased collections.

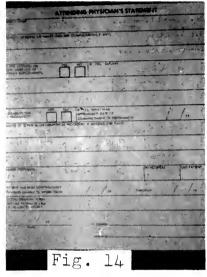
The practice analysis (See Fig. 12) provided at the end of each billing period has proven to be invaluable. It provides the information of where the time is spent and gives the opportunity to spot any weakness that begins to develop before it becomes a major problem. It can point out discrepancies that may require fee adjustments; so that all phases of practice can be equitable. With this information available, it is possible to develop the type of practice that is preferred and can point out when it is feasible to consider an associate or expansion.

Each month after an itemized statement is sent to the patient, an exact itemized copy (See Fig. 13) is provided for the office. On the reverse side of this is a standard insurance form (See Fig. 14). Should a third party require a statement, the form could be completed and sent with the itemized copy on the reverse side. With the passage of time, this is surely to become a more important phase of









the system. If private practice is to continue as we have known it in the past, the dental practitioner must cooperate with the various insurance carriers. This does not mean to imply that it is necessary to "sell our profession down the river," but cooperation is necessary to stay abreast with the socioeconomic changes of our times to preserve our free enterprise system. Here the data processing system provides simple, time saving method of providing the necessary information for the various insurance carriers.

Another advantage of this system is the reasonable charge for their services. The charges to the doctor vary considerably with the various billing systems. Of all the systems consulted, Management Systems of the South was one of the more reasonable but with complete services that were considered necessary. There is a basic charge each month which includes most statements of the average office.

For statements in excess of the allotted number, there is a per statement charge. Both the basic charge and the per statement charge is considerably less than what is considered to be the cost per statement by practice analysis experts. Other services are also available under the system in some localities, such as, collection letters at an additional charge.

Unfortunately, the business side of dentistry is getting more complex and costly each passing year. The operation of the business side of the dental practice is subject to the same economic laws as other business operations. It is true the aver-

age dentist did not enter practice for the purpose of becoming a business manager, but unless he learns to operate the business side of his practice efficiently, he may find himself on the never ending treadmill of working harder to make less.

This information on data processing is presented with the hope it will be a guideline for the selection of a system. This statement is made advisedly for it is certain there is a computer in your future.

315 RANDOLPH MEDICAL CENTER CHARLOTTE, NORTH CAROLINA 28207

## **Ohituaries**

Luther P. Baker, 83, of Kings Mountain, a life member of the First District Dental Society, the North Carolina Dental Society, and the American Dental Association, died October 18, 1967.

Stuart F. Clayton, 40, of Hickory, a member of the First District Dental Society, died October 28, 1967.

**P. C. Hull,** 82, of Charlotte, a life member of the Second District Dental Society, the North Carolina Dental Society, and the American Dental Association, died August 5, 1967.

Allen T. Lockwood, 57, of Asheville, a member of the First District Dental Society, died December 25, 1967.

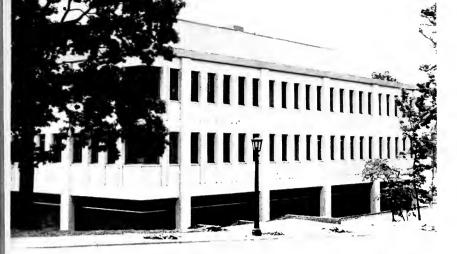
Guy M. Masten, 70, of Winston-Salem, a life member of the Second District Dental Society, the North Carolina Dental Society, and the American Dental Association, died August 20, 1967.

Clarence N. Stone, 60, a retired member of the Third District Dental Society, died September 27, 1967.

William C. Taylor, 77, of Salisbury, a life member of the Second District Dental Society, the North Carolina Dental Society, and the American Dental Association, died September 5, 1967.

Ben H. Webster, 74, of Charlotte, a life member of the Second District Dental Society, the North Carolina Dental Society, and the American Dental Association, died September 1, 1967.

Robert A. Wilkins, 70, of Mount Olive, a member of the Fifth District Dental Society, died September 26, 1967.



The new Dental Research Center at Chapel Hill, one of five being developed in the United States in a campus setting. Construction began in September 1965 and completed in June 1967.

## **Dental Research Center Dedicated**

The new 1.3 million dollar Dental Research Center at the University of North Carolina School of Dentistry was formally dedicated October 15, 1967. Dr. Cleon W. Sanders, president, the Dental Foundation of North Carolina, Inc., presided at the ceremony which took place in the U-shaped courtyard bounded by the Research Building, the School of Dentistry,

and the School of Medicine on the Chapel Hill campus.

Following the invocation by Dr. H. Royster Chamblee, a past president of the Foundation, Dr. William C. Friday, president, the University of North Carolina and Dr. William A. Garrett, president, the American Dental Association spoke on "This Day of Dedication."

The dedicatory address was di-

Dr. Bennie D. Barker, assistant dean for Academic Affairs of the School of Dentistry and secretary-treasurer of the Dental Foundation of North Carolina, Inc., presents the dedication plaque.





Dr. William C. Friday, president, University of North Carolina, speaks on "This Day of Dedication."



Dr. James W. Bawden, dean, UNC School of Dentistry, talks of "The Present."

vided into three parts. Dr. John C. Brauer, first dean of the UNC School of Dentistry recalled "The Past"; Dr. James W. Bawden, present dean of the UNC School of Dentistry commented on "The Present"; and Dr. Seymour Kreshover, director, National Institute of Dental Research in Bethesda, Maryland predicted "The Future."

Dr. Bennie D. Barker, assistant dean for academic affairs and secretary-treasurer of the Foundation, presented the dedication plaque to Dr. J. Carlyle Sitterson, chancellor of the University.

The plaque reads as follows: "To Commemorate the Formal Dedication of the Dental Research Center, University of North Carolina, School of Dentistry, October Fifteenth, Nineteen Hundred Sixty-Seven."

Chancellor Sitterson accepted the plaque on behalf of the University and awarded it to the custody of Dr. Andrew D. Dixon, assistant dean for research, who accepted it for the School and the Center.

James D. Kaley, senior dental student, cut the blue and white ribbon at the door of the new building

Dr. John C. Brauer, first dean of the UNC School of Dentistry, speaks on "The Past."



signifying the opening of the Dental Research Center.

The School of Dentistry at Chapel Hill is one of five schools in the United States chosen as a regional research center being developed by the National Institute of Dental Research to promote research and training on a broad interdisciplinary base. Whereas most programs of grant support have aided individual research projects, the new program encourages institutions to bring together all the elements necessary for a united and sustained attack on complex dental problems which continue to resist the individualistic approach.

Music for the occasion was furnished by the University of North Carolina Tar Heel Band under the direction of Major John F. Yesulaitis.

Following the dedication ceremony visitors toured the new building with dental students as guides. Refreshments were served in the lobby by members of the Faculty Wives Club. Mrs. H. V. Murray, Jr. is president of this group. Others serving as hostesses were: Mrs. Don L. Allen, Mrs. Bennie D. Barker, Mrs. James W. Bawden, Mrs. Andrew D. Dixon, and Mrs. Duane F. Taylor.



James D. Kaley, senior dental student and president of the Spurgeon Dental Society, cuts the ribbon while Dr. Andrew D. Dixon, assistant dean for research and director of the new Dental Research Center, looks on.



Dr. William A. Garrett, president, American Dental Association, brings greetings from more than 109,000 dentists.

Dr. Seymour J. Kreshover, director, National Institute of Dental Research, Bethesda, Maryland, discusses "The Future."



Dr. Cleon Sanders, president, Dental Foundation of North Carolina, Inc., welcomes distinguished guests and visitors.



### **District News**







Top: First District Officers: Cecil A. Pless, Jr., president; Gene L. Reese, vice president; F. A. Buchanan, president-elect; W. A. Mynatt, secretary-treasurer. Middle: Table clinic. Bottom: President Kirkland takes time out in Asheville with NCDHA officers: Mrs. Carolyn C. Williams, president; Jean Stines, past president; and Barbara Lail, president, first district.

#### First District

F. A. BUCHANAN, Editor

Dr. Peter Dawson of St. Petersburg, Florida stressed the importance of complete dentistry at the First District meeting at Grove Park Inn, Asheville, September 30-October 2.

The meeting got off to a fine start Saturday night with a cocktail party and dance featuring music by "The Casuals." Golfers and duffers teed off on Sunday at the Asheville Country Club in an all-day tournament. The winners were: A. P. Stepp, Walter Clayton, Lyman Gregory, and Otis Hendren.

Nine members of the District presented table clinics Sunday afternoon.

President Max Carpenter presided at the business session Sunday night. In his charge to the new members Fenton Cunningham urged that each patient be treated as a living individual deserving of the finest treatment.

Fifteen dentists were elected to membership. They were: Thomas F. Blume, Gastonia: Marvin L. Elliott, Asheville; Benjamin Y. Ellis, Grover; Joseph W. Farrar, Morganton: David K. Hall, Jr., Asheville; Hermon K. Herrin. Gastonia: Charles W. McCall, Jr., Tryon; Glenn R. Penny, Boone; Phillip S. Perdue, Banner Elk; James N. Poovey, Hickory; Vader Shelton, Jr., Drexel; Robert M. Snoderly, Waynesville; Charles D. Stroud. Ellenboro: David E. Trawick, Boiling Springs; and Philip E. Turner, Shelby.

Dean James W. Bawden, UNC School of Dentistry, reported on coming events at Chapel Hill and George F. Kirkland, Jr., president, North Carolina Dental Society, briefed the members on current affairs of the Society.

Three resolutions were adopted urging the delegates from North Carolina to oppose an increase in A. D. A. dues, a statement on dental and dental hygienist licensure, and a resolution on the scope of duties of dental auxiliaries which are to be considered by the A.D.A. House of Delegates in November.

New officers elected were: Cecil A. Pless, Jr., president; Francis A. Buchanan, president-elect; Gene L. Reese, vice president; William A. Mynatt, secretary-treasurer; and Clarence W. Canrobert, Jr., editor.

The meeting closed Monday afternoon following a joint luncheon meeting with the Auxiliary.

#### **Second District**

W. G. WARE, JR., Editor

Over 450 dentists, auxiliary personnel, and guests registered at the third annual Tar Heel Dental Seminar sponsored by the Second District in Charlotte September 17-19, 1967. Clinicians for the three-day meeting at White House Inn were Dr. W. Harry Archer of Pittsburgh and Dr. Jerome M. Schweitzer of New York.

Four projected clinics and five table clinics were presented Sunday afternoon. A social hour, banquet and dance completed Sunday's activities.

At the business session Monday evening 17 new members were elected and inducted. They were: Charles B. Aycock, Charlotte;





Top: President J. Harry Spillman installs new Second District officers: W. Stewart Peery, president; W. Smith Kirk, president-elect; M. Lamar Dorton, secretary-treasurer; and William G. Ware, Jr., delegate. Middle: James E. Graham, Jr. presents table clinic. Bottom: A. Breece Breland presents table clinic.

Jimmie P. Baucom, Charlotte; James A. Brown, Charlotte; Lyle E. Crumpler, Charlotte; John R. Dunn, Charlotte; Robert D. Fox,







Top: President C. W. Horton (center) presents gavel to incoming president, Maurice B. Richardson. Other Third District officers for 1967-60 are (I to r): James B. Howell, secretary-treasurer, W. Kenneth Young, vice president; and L. P. Megyinson, Jr., president-elect. Middle: Table clinic by Brater B. Sapp, Jr. Bottom: Guy R. Willis, president, Crate Board of Dental Examiners addresses the Third District.

Winston-Salem; Kenneth E. Mitchum, Charlotte; Charles B. Reed, Fort Bragg; Clavis O. Shelton, Walnut Cove; Fred J. Smith, Winston-Salem; Harry G. Snyder, Charlotte; Dennis H. Springer, Charlotte; David W. Stone, Jr., Charlotte; Phillip G. Tesh, Con-

cord; Gerald P. Turner, Statesville; Bernard Wilkie, Charlotte; and Bobby G. Wooten, Winston-Salem.

W. Stewart Peery was installed as president for the coming year. Other officers elected and installed were: W. Smith Kirk, president-elect; W. H. Price, vice president; M. L. Dorton, secretary-treasurer; and Kenneth D. Owen, editor.

Ten commercial exhibits were on display during the meeting.

#### Third District

RICHARD M. FIELDS, Editor

Twenty-four new members were elected and inducted by the Third District at its annual meeting in High Point September 23-25, 1967 at the Sheraton Hotel.

Saturday's events included guided tours of Hatteras Yacht Company and Alderman's Studio and an evening at the Showboat Dinner Theater.

Blair Park was the scene of the annual golf tournament on Sunday, while many guests visited the Dental Hygiene Department at Guilford Technical Institute in the morning. At the banquet on Sunday evening Dr. Tom Haggai was the featured speaker.

Dr. Harry M. Klenda of Wichita, Kansas, and first vice president of the American Dental Association, was the featured clinician.

At the business session several amendments in the constitution and bylaws were adopted, including a raise in dues from \$5.00 to \$10.00 annually. Resolutions were adopted urging the delegates from North Carolina to oppose resolutions on the scope of auxiliary duties and licensure of dentists and dental hygienists.

Elected to membership were: High Robert E. Bass. Point: Benjamin W. Brown, Greensboro: Michael B. Buckland, Chapel Hill; Joseph E. Campbell, Durham; John E. Chandler, Greensboro; Numa W. Cobb. Jr., Greensboro; Michael L. Collins, Greensboro; Richard M. Courtney, Chapel Hill; William G. Davis, Chapel Hill; Thomas B. Garrett, High Point; Gus W. Gray, Chapel Hill; Frank L. Greiner, Greensboro: Gordon B. Helmers. Chapel Hill; Harold M. Holt. Greensboro; Barrett M. Hunter, Norfolk, Va.; Donald R. Kramer. Chapel Hill; Joseph F. Laton, Chapel Hill; Donald E. Lineberry, Guilford College; Durel G. Long, Greensboro; Raymond R. Meisel, Greensboro; James E. Overberger, Chapel Hill; Jerry H. Rosenbaum, Chapel Hill; James C. Thompson, Parris Island, S. C.; and Pendleton Waldron. Elmendorf AFB, G. Alaska.

Third District officers for 1967-68 are: Maurice B. Richardson, president; L. P. Megginson, Jr., president-elect; W. Kenneth Young, vice president; James B. Howell, secretary-treasurer; and Richard M. Fields, editor.

#### **Fourth District**

GLENN F. BITLER, Editor

The Fourth District Dental Society opened its annual meeting with a social hour, banquet, and dance on Saturday, October 7 at the Downtowner Motor Inn, Fayetteville. Sunday morning a golf tournament was held at Highland Country Club. The afternoon was given over to table clinics, followed by a banquet and business session in the evening when 17 new members were accepted.

# FOURTH DISTRICT TABLE CLINICS









Dr. Roderick L. Lester of Denver, Colorado was the guest lecturer on Monday. His topic was "Everyday Problems of the General Practitioner in Exodontia."

At the business session annual dues were increased from \$5.00 to

\$10.00 and resolutions were passed opposing resolutions to be considered by the A.D.A. House of Delegates on the expansion of duties of auxiliary personnel and elimination of clinical examinations by state boards of dental examiners.

New members of the Fourth Dis-Bernard A. trict are: Brown. Raleigh; Joe T. Earp, Smithfield; Karl F. Ehrlich, Fayetteville; John T. Fox, Selma; James B. Hancock, Fayetteville; Johnnie D. Hodges, Jr., Smithfield; Percy W. Jessup, Jr., Elizabethtown; William Merritt, Clinton; Earl R. Nichols, Fayetteville; Riley C. Pleasants, Jr., Groton, Conn.; Joseph F. Quigg, Fayetteville; Bobby C. Raynor, Garner; Robert H. Sager, Raleigh; Paul D. Sanders, Fayetteville; William G. Schneider, Raleigh; Walter K. Walker, Raleigh; and Larry A. Williams, Benson.

Officers elected and installed were: Penn Marshall, Jr., president; P. C. Purvis, president-elect; John N. Denning, vice president; Harold E. Maxwell, secretary-treasurer; and Frederick G. Hasty, editor.

The Fourth District will meet in Raleigh in 1968 at the Statler Hilton Inn October 12-14.

#### Fifth District

JAMES A. PRIVETTE, Editor

The Fifth District convened at the Blockade Runner on Wrightsville Beach September 10-11, 1967 for its annual meeting.

Five table clinics were presented on Sunday afternoon and a social hour, banquet, and business session were held that evening.

Dr. G. L. D. Burnett of Rochester, N. Y. presented a program on "Practice Procedures in Crown and Bridge Practice" on Monday.

Seventeen new members were installed. They were: Wayne P. Attkisson, Oxon Hill, Md.; George K. Butterfield, Wilson; Pascal S. Camak, Fort Lewis, Wash.; Wade T. Fields, Elizabeth City; William C. Goodwin, Jr., Norfolk, Va.; Richard F. Gorman, Shaw AFB, S. C.; Thomas J. Head, Jr., Wilmington; Douglas G. Hill, Kinston; Johnnie H. Horton, Edenton; James N. McIntosh, APO, New York; H. A. Nicholson, Wrightsville Beach; Julian B. Rosemond, Wilson; William J. Sherwood, Washington; James B. Slack, Pinetops; Adolphus G. White, Rocky Mount; W. Alex Willis, Chapel Hill; and Pinkney B. Young, III. Greenville.

Elected to office for 1967-68 were: M. W. Aldridge, president; T. S. Fleming, president-elect; W. S. Linville, Jr., vice president; James L. Cox, secretary-treasurer; and James A. Privette, editor.





FIFTH DISTRICT TABLE CLINICS: Left, Donald L. Henson explains the advantages of the Keogh Act. Right, Richard F. Hunt, Jr., suggests measures to prevent postoperative hemorrhage.



FIFTH DISTRICT OFFICERS 1967-68: (I to r), Walter S. Linville, Jr., vice president; James A. Privette, editor; James L. Cox, secretary-treasurer; T. S. Fleming, president-elect; Zeno L. Edwards, Jr., retiring president.

# News briefs from . . . North Carolina Dental Hygienists' Association



#### On the National Scene

North Carolina was well represented at the 44th annual session of the American Dental Hygienists' Association in Washington, D. C., October 27-November 2. Gail Mc-Lean of Durham was the Tar Heel delegate. Jean Stines of Asheville participated in the Dental Hvgienists' Editors Workshop. Eleanor Forbes of Chapel Hill, associate editor of The Journal of the ADHA, was a panelist on the workshop program. Margaret Cain of High Point was a nominee for trustee of District VI. Ten junior ADHA members from Wavne Technical Institute attended the meeting.

#### First District

On October 2 the First District met at Grove Park Inn, Asheville. Officers elected were: Barbara Lail, president; Judy Caldwell, vice president; and Ann Morrow, secretary-treasurer. A committee was appointed to draft a constitution and bylaws, plans were made to promote Children's Dental Health Week, and it was decided to participate in Health Career Day at Asheville-Biltmore College on October 14.

#### **Second District**

The Second District officers elected on May 12 in Pinehurst were: Brenda Craig, president; Loretta Gaddy, vice president; and Peggy Smathers, secretary-treasurer.

Dr. Luby Sherrill of the Mecklenburg County Public Health Department was the guest speaker at a meeting in Charlotte on June 21.

Twenty-two members attended the September 22 meeting in Charlotte and heard Mrs. Bobbi Duncan discuss "Various Aspects of Personal Development."

A committee to draft a constitution and bylaws was appointed when the district met in Charlotte on September 18.

#### **Third District**

Temporary officers elected at an organizational meeting of the Third District in High Point September 25 were: Helen Aldridge, Kav Edwards. president: and Priscilla president: Levine. secretary-treasurer. These officers will serve until the Third District is formally chartered at the annual meeting of N.C.D.H.A. next May in Pinehurst. A committee has been appointed to draw up a constitution and bylaws. Registration for the meeting totalled 68, including 13 active members.

Elsie Haithcock, Helen Aldridge, Jean Mann, and Nancy Wilkinson, all of High Point, presented a table clinic titled "Mixing Polishing Paste" at the annual meeting of the Third District Dental Society of North Carolina September 23-25.

#### Fourth District

The Fourth District met in Fayetteville October 9. Officers elected were: Patty Smittle, president; Mrs. Terry Wotten, vice president; and Mrs. Marty Eastman, secretarytreasurer. A committee was appointed to draft a constitution and bylaws for the District.

#### Fifth District

Organization of a Fifth District Dental Hygienist Association has been postponed until membership has been increased in the area.

On September 20 the Southeastern Dental Hygienists' Study Club met at the office of Dr. George Edwards in Kinston.

### STATEMENT OF OWNERSHIP, MANAGEMENT AND CIRCULATION

(Act of October 23, 1962: Section 4369, Title 39, United States Code)

United States Code)

1. Date of filing: September 30, 1967.

2. Title of Publication: THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY.

3. Frequency of issue: Quarterly — January, April, August, and September.

4. Location of known office of publication: 120 East Peace Street, Raleigh, North Carolina 27604 (Wake County).

5. Location of the headquarters or general business offices of the publishers: Same as above.

above.

6. Names and addresses of publisher, editor,

6. Names and addresses of publisher, editor, and managing editor:
Publisher: North Carolina Dental Society,
P. O. Box 11065, Raleigh, N. C. 27604.
Editor: Dr. A. Breece Breland, 1927 Brunswick Ave., Charlotte, N. C. 28207.
Managing Editor: Andrew M. Cunningham,
P. O. Box 11065, Raleigh, N. C. 27604.
7. Owner: North Carolina Dental Society,
P. O. Box 11065, Raleigh, N. C. 27604.
8. Known bondholders, mortgagees, and other security holders owning or holding 1 percent or more of total amount of bonds, mortgages or other securities: None other securities: None

9. Paragraphs 7 and 8 include, in cases where

2. Paragraphs / and 8 include, in cases where the stockholder on security holder appears upon the books of the company as trustee or in any other fiduciary relation, the name of the person or corporation for whom such trustee is acting. also the statements in the two paragraphs show the affiant's full knowledge and belief as to the circumstances and conditions under which stockholders and security holders who do not appear upon the books of the company as trustees, hold stock and securities in a capacity other than that of a bona fide owner. Names and addresses of individuals who are stockholders of a corpo-ration which itself is a stockholder or holder of bonds, mortgages or other securities of the pub-lishing corporation have been included in para-graphs 7 and 8 when the interests of such in-dividuals are equivalent to 1 percent or more of the total amount of the stock or securities of the publishing corporation.

Extent and nature of circulation:

A. Total no. copies printed (net press run): Average no. copies each issue during preceding 12 months, 1,600; Single issue nearest to filing date, 1,507.

B. Paid circulation:

1. Sales through dealers and carriers, street vendors and counter sales: Average no. copies each issue during preceding 12 months. None; Single issue nearest to filing

date, None.

2. Mail subscriptions: Average no. copies each issue during preceding 12 months, 1,339; Single issue nearest to filing date,

1,331.
C. Total paid circulation: Average no. copies each issue during preceding 12 months, 1,339; Single issue nearest to filing date, 1,331.

1.339; Single issue nearest to filing date, 1,331. D. Free distribution (including samples) by mail, carrier or other means: Average nocopies each issue during preceding 12 months, 178; Single issue nearest to filing date, 176. E. Total distribution (sum of C and D): Average no. copies each issue during preceding 12 months, 1,517; Single issue nearest to filing date, 1507.

date, 1,507.

F. Office use, left-over, unaccounted, spoiled

F. Office use, left-over, unaccounted, spoiled after printing: Average no copies each issue during preceding 12 months, 83; Single issue nearest to filing date, 93.

G. Total (sum of E & F—should equal net press run shown in A): Average no. copies each issue during preceding 12 months, 1,600; Single issue nearest to filing date, 1,600.

1 certify that the statements made by me above the correct and complete.

are correct and complete.

ANDREW M. CUNNINGHAM, Managing Editor

# **Continuing Education**

#### **BOSTON UNIVERSITY**

Restorative Dentistry — From Single Teeth to Quadrants and Reconstruction. Dr. Miles R. Markley. March 7-8, 1968.

**Periodontal Pathology.** Drs. Henry M. Goldman and Morris P. Ruben. March 18-22, 1968.

**Surgical Endodontics.** Drs. Herbert Schilder, Harold Levin, Seymour Melnick, and Samuel Rubin. March 25-29, 1968.

Clinical Periodontal Surgery. Drs. Gerald L. Kramer and J. David Kohn. March 28-30, 1968.

The Superperiosteal Unilateral Implant as a Bridge Abutment. Dr. Aaron Gershkoff. April 4-6, 1968.

Hospital Procedures for the Exceptional Child. Drs. Spencer N. Frankl, Harold Turner, and Ronald Diodati. April 4-5, 1968.

Histology of Orthodontic Tooth Movement: Tissue Changes in Various Tooth Movements. Drs. Henry M. Goldman and Morris P. Ruben. April 5-6, 1968.

Basic Periodontal Therapy. Dr. Henry M. Goldman and staff. April 22-26, 1968.

The Modern Approach to Periodontal Therapy. Dr. Saul Schluger. April 25-26, 1968.

The Use of Ultrasonics in Periodontal Therapy. Drs. Henry M. Goldman and Morris P. Ruben. April 27, 1968.

Advanced Periodontal Therapy. Drs. Henry M. Goldman, Bernard S.

Chaikin, Gerald M. Kramer, William Pendergast, Morris P. Ruben, and associates. April 29-May 3, 1968.

Work Simplification in Modern Practice. Dr. Harold C. Kilpatrick. May 3-4, 1968.

Oral Surgery. General Robert Shira. May 4-5, 1968.

Full Mouth Reconstruction. Drs. Leo Talkov, Robert J. Baraban and staff. May 13-17, 1968.

For information write: Boston University, School of Graduate Dentistry, 80 E. Concord St., Boston, Mass. 02118.

#### **EMORY UNIVERSITY**

Diagnostic Concepts for the Modern General Practitioner. Dr. Charles L. Halstead. April 2-3, 1968.

Office Procedures for the Standardized Amalgam. Dr. Wilmer B. Eames. April 17, 1968.

Periodontics for the General Practitioner. Drs. Michael E. Fritz, George Ulrich, and Marvin Sugarman. April 18-20, 1968.

Endodontics. Dr. Thomas P. Serene. May 3-4, 1968.

Occlusion and Registration of Maxillo-mandibular Relationships. Drs. Parker E. Mahan and Alfred K. Williams. June 5-6, 1968.

For information write: School of Dentistry, Emory University, 106 Forrest Ave., Atlanta, Ga. 30303.

#### UNIVERSITY OF KENTUCKY

Pulp Therapy for Primary and Young Permanent Teeth. Dr. Robert H. Spedding and staff. February 14, 1968.

Oral Medicine and Clinical Therapeutics. Drs. Sheldin Rovin and Donald E. Knapp. February 22, 1968.

Recent Developments in Public Dental Programs. Drs. Wesley O. Young, Alvin L. Morris, and Edward B. Gernet. February 26-27, 1968.

Combined Periodontic-Endodontic Therapy. Dr. William H. Biatt. April 23-24, 1968.

**Full Mouth Reconstruction** — **A Total Oral Concept.** Dr. Irving Gordon. May 10-11, 1968.

Clinical Therapeutics and Oral Pharmacology. Dr. Donald E. Knapp. May 13-14, 1968.

**Removable Partial Dentures.** Dr. Davis Henderson. June 3-5, 1968.

For information write: College of Dentistry, University of Kentucky, Lexington, Ky.

# UNIVERSITY OF PENNSYLVANIA

**The Dental Operating Team.** Dr. Edgar M. Miller and associates. March 14-15, 1968.

Practical and Simplified Procedures in Crown and Bridge Prosthesis. Dr. Charles N. Sceia. March 25-29, 1968.

**Periodontal Prosthesis.** Drs. Morton Amsterdam and W. Walter Cohen. March 4-8, 1968.

Medical and Physical Evaluation Procedures for Dental Hygienists. Dr. Thomas A. McFall, Anne S. Folweiler, R.D.H., and associates. April 3-5, 1968. For information write: Continuation Courses, University of Pennsylvania, School of Medicine, 4001 Spruce St., Philadelphia, Pa. 19104.

#### SAINT LOUIS UNIVERSITY

A Practical Program for the Control of Dental Diseases by the Dentist and His Patient. Drs. Sumter S. Arnim and Merrill G. Wheatcroft. February 28-29, 1968.

The Management of Oral Surgery Problems in General Practice. Dr. Joseph P. Cappuccio. March 6-7, 1968.

For information write: Metropolitan College, Saint Louis University, 221 No. Grand Blvd., St. Louis, Mo. 63103.

# UNIVERSITY OF NORTH CAROLINA

Second Annual Dental Alumni Seminar. Subject and instructors to be announced. April 6, 1968.

Prosthodontics—Problems Associated with the Construction of Complete Dentures. School of Dentistry Faculty. May 27-28, 1968. Fee: \$100.

Clinical Periodontics—Diagnosis and Treatment. School of Dentistry Faculty. June 4-7, 1968. Fee: \$175.

#### UNIVERSITY OF LOUISVILLE

Periodontics: Diagnosis, Treatment, Planning, and Restorative Considerations. Dr. Charles W. Conroy. March 7, 1968.

Complete Denture Prosthodontics. Drs. Theodore E. Logan and Hubert Fields, Jr. May 2, 1968.

**Dental Radiology for the Dental Hygienist.** Dr. Vernon Dodd and staff. June 20, 1968.

## DISABILITY INSURANCE

# MEMBERS OF THE NORTH CAROLINA DENTAL SOCIETY

#### PLANS UP TO

- \$250,00 WEEKLY DISABILITY INCOME BENEFITS (\$1,080,00 monthly)
- \$20.00 PER DAY EXTRA HOSPITAL BENEFIT, AND UP TO \$225.00 SURGICAL BENEFITS FOR MEMBER AND DEPENDENTS (Optional)

#### PLAN L-7 (Basic)

Lifetime Accident and 7 Years Sickness

		Principal Sum For	SEMI-ANNU.	AL PREMIUMS
Weekly	Dismemberment	Accidental	Premium	†Reduced Premium
Benefits	Benefits	Death	Age 40 and over	To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$244.50	\$183.50
\$200.00	Up to \$40,000.00	\$5,000.00	\$196.50	\$147.50
\$150.00	Up to \$30,000.00	\$5,000.00	\$148.50	\$111.50
\$100.00	Up to \$20,000.00	\$5,000.00	\$100.50	\$.75.50

#### PLAN L-65 (Long Term)

Lifetime Accident and For Sickness, from Inception of Disability To Your Attainment of Age 65

SEMI-ANNUAL PREMIUMS

Weekly Benefits	Dismemberment Benefits	Accidental Death	Premium Age 40 and over	†Reduced Premium To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$292.00	\$219.25
\$200.00	Up to \$40,000.00	\$5,000.00	\$234.50	\$176.00
\$150.00	Up to \$30,000.00	\$5,000.0 <b>0</b>	\$177.00	\$133.00
\$100.00	Up to \$20,000.00	\$5,000.00	\$119.50	\$ 89.75

The premiums for Plan L-65 will be reduced to the same premium as for Plan L-7 at age 58,

Note: The above rates do not increase at age 50 or even at age 60! †On attaining age 40, age 40 rotes apply on renewal.

#### J. L. CRUMPTON, State Mgr.

Professional Group Disability Division

J. SLADE CRUMPTON, Asst. Mgr. Box 147, Durham, N. C.

Representing Commercial Insurance Co. of Nework, N. J Member Continental Insurance Companies (New York)

# North Carolina Dental Society DIRECTORY 1967-1968

STATE OFFICERS

STATE COMMITTEES

DISTRICT OFFICERS

DISTRICT COMMITTEES

ALPHABETICAL ROSTER OF MEMBERS

GEOGRAPHICAL ROSTER OF MEMBERS

ALLIED ORGANIZATION OFFICERS

The use of this roster as a general mailing list is prohibited except by specific authority.

#### NORTH CAROLINA DENTAL SOCIETY 1967-1968

#### **OFFICERS**

President: George F. Kirkland, Jr., 913 Lamond AvenueDurham	27701
President-Elect: Colin P. Osborne, Jr., P. O. Drawer 1344Lumberton	28358
Vice President: James H. Lee, 308 N. Taylor StreetGoldsboro	27530
Secretary-Treasurer: C. W. Poindexter, 309 East Wendover AvenueGreensboro	27401
Editor-Publisher: A. Breece Breland, 1927 Brunswick Avenue	28207
Associate Editor-Publisher: Barry G. Miller, 1927 Brunswick Avenue	28207
Speaker of the House: Ralph D. Coffey, P. O. Box 693 Morganton	28655
Executive Secretary: Andrew M. Cunningham, P. O. Box 11065Raleigh	27604
EXECUTIVE COMMITTEE	
Chairman: Frank G. Atwater (1970), 1202 Madison Avenue	
1012 Kings Drive	28207
1012 Kings Drive	28207

#### DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Paul E. Jones (1969), Chairman

George F. Kirkland, Jr. (1968)
Roy L. Lindahl (1969), Vice Chairman
C. C. Poindexter

Ralph D. Coffey (1968)
Relph D. Coffey (1968)

# ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Frank G. Atwater
A. Breece Breland
J. Homer Guion
James H. Lee
C. P. Osborne, Jr.
C. W. Poindexter

#### STANDING COMMITTEES

Clinic: Robert H. Gainey, Chairman; Galen W. Quinn, R. F. Hunt, Jr., E. Kent Rogers, III, Fred C. Miller.

Constitution and Bylaws: Thomas G. Nisbet (1970), Chairman; G. Shuford Abernethy (1968); D. T. Carr (1969); C. P. Godwin (1971); J. Henry Ligon, Jr. (1972).

Council on Dental Health: F. A. Buchanan (1970), Chairman; E. A. Pearson, Jr. (1968); W. H. Price (1969); Horace K. Thompson (1971); Norman F. Ross (1972).

Dental Education: C. W. Sanders (1969), Chairman; Paul A. Stroup, Jr. (1968); E. D. Baker (1970); R. B. Barden (1971); F. A. Buchanan (1971); Ralph D. Coffey (1969); S. P. Gay (1968); Riley E. Spoon, Jr. (1970); Sandy C. Marks (1972); James E. Furr (1972).

Ethics: Joseph M. Johnson, Chairman (1972); Elliot R. Motley (1970); C. W. Horton (1968); C. Z. Candler, Jr. (1969); Darden J. Eure (1971).

Exhibit: R. B. Barden, Chairman; Henry V. Murray, Jr. (Scientific Exhibits); G. C. Stowe, Jr., C. E. Roberts, C. Mitchell Hatchett, Jr.

Insurance: J. S. D. Nelson (1968), Chairman; T. L. Blair (1969); John S. Dilday (1971); W. A. Mynatt (1970); Donald L. Henson (1972).

Legislative: Mott P. Blair (1969), Chairman; L. C. Holshouser (1968), Secretary; Paul E. Jones (1971); H. Royster Chamblee (1970); C. B. Taylor (1972).

Library and History: Neal Sheffield (1968), Chairman; Frank O. Alford (1969); M. M. Lilley (1971); S. H. Steelman (1970); C. E. Abernethy (1972).

Membership: Colin P. Osborne, Jr., Chairman; Secretary-Treasurers of the five District Societies.

Military and Veterans Affairs: T. Edwin Perry (1968), Chairman; Coyte R. Minges (1969); Baxter B. Sapp, Jr. (1970); Carey T. Wells, Jr. (1971); W. F. Yelton (1972).

Necrology: Robert T. Byrd (1970), Chairman; Luther H. Butler (1971); C. B. Johnson, New Bern (1969); Robert A. George (1968); Albert P. Cline (1972).

**Program:** Baxter B. Sapp, Jr., Chairman; Pearce Roberts, Jr., J. Harry Spillman, Guy R. Willis, James L. Cox, Lloyd B. Stanley.

Prosthetic Dental Service: C. Z. Candler, Jr. (1969), Chairman; C. P. Osborne, Jr. (1968); Thomas L. Dixon (1971); C. D. Eatman (1970); Horace P. Reeves, Jr. (1972).

Publicity: Glenn F. Bitler (1972), Chairman; J. Donald Kiser (1971); C. T. Barker (1968); F. A. Buchanan (1970); H. Estes Butler (1969).

Relief: J. W. Heinz (1969), Chairman; S. L. Bobbitt (1970); W. H. Breeland (1971): J. T. Lasley (1968): H. W. Gooding (1972).

State Institutions: James M. Zealy (1972), Chairman; Robert J. Harned (1970); K. L. Johnson (1968); Thomas A. Smith (1969); W. D. Yelton (1971).

#### SPECIAL COMMITTEES

Annual Session: L. D. Herring, General Chairman; Baxter B. Sapp, Jr. (Program); Robert H. Gainey (Clinic); W. Kimball Griffin (Entertainment Co-ordinator); Robert W. Sugg (Dance); C. R. VanderVoort (Banquet and Reception); R. B. Barden (Exhibit); James E. Furr (Hospitality); David H. Freshwater (Liaison to Auxiliary); C. F. Clark, Jr. (Monitor); Robert T. Byrd (Necrology); Glenn F. Bitler (Publicity); Henry V. Murray, Jr. (Scientific Exhibits); William J. Wiggs (Sports); W. A. Mynatt (Visual Education); Zeno L. Edwards, Jr. (Arrangements).

Arrangements: Zeno L. Edwards, Jr., Chairman; William E. Kidd, J. Fred Sproul, Charles A. Jarrett, B. E. Kanoy, John W. Girard, Jr., William M. Heeden, Jr.

Banquet and Reception: C. R. VanderVoort, Chairman; M. M. Lilley, Cecil A. Pless, Jr., M. L. Cherry, Ben H. Houston, R. B. Warlick, Robert D. White, Robert W. Wentz.

Cancer: Benny W. Martin, Chairman; Grover C. Hunter, Jr., Glenn A. Lazenby, Jr., W. Robert Caviness, Dwight L. Clark.

Children's Dental Health: Duncan M. Getsinger, Chairman; J. P. Hale, Robert H. Gilbert, D. B. Seitter, Jr., N. J. Duncan, D. L. Ashworth.

Committee Structure: Pearce Roberts, Jr., Chairman; Ralph D. Coffey, Darden J. Eure.

Continuing Education: Guy R. Willis, Chairman; Bennie D. Barker, Keith L. Bentley, Glenn F. Bitler, Frank H. Daniel, Wade H. Breeland, David H. Freshwater, Frederick G. Hasty, Robert W. Holmes, Walter T. McFall, Jr., Lackey B. Peeler, James A. Privette.

Dance: Robert W. Sugg, Chairman; J. J. Lauten, J. R. Edwards, Jr., Robert E. Finch, William G. Lee.

Dental Assistants: William H. Oliver, Chairman; James M. Zealy, Zyba K. Massey, Charles S. Cooke, A. P. Cline, Jr.

Dental Care for the Aged: Walter H. Finch, Jr., Chairman; Lawrence H. Paschal, W. H. Gray, Jr., Ervin M. Funderburk, Guy V. Harris, Milo J. Hoffman, Alton W. Bottoms.

Dental Care Programs: E. U. Austin, Chairman; Mott P. Blair, R. A. Daniel, Jr., S. P. Gay, Franklin E. Martin.

**Dental Hygienists:** M. W. Carpenter, Chairman; J. Harry Spillman, Charles A. Reap, Jr., Charles T. Barker, Marvin E. Walker.

Dental Practice Act: W. L. Hand, Jr., Chairman; Thomas M. Hunter, Frank O. Alford, Roger E. Barton, Robert B. Litton.

**Dental Service Corporation:** Roy L. Lindahl, Chairman; Glenn F. Bitler, F. A. Buchanan, John H. Dixon, Charles P. Godwin, James B. Howell, R. S. Hunter, Pearce Roberts, Jr., Freeman C. Slaughter, James M. Zealy.

Entertainment: W. Kimball Griffin, Entertainment Co-ordinator; Robert W. Sugg, Dance; C. R. VanderVoort, Banquet and Reception.

Hospitality: J. E. Furr, Chairman; E. Smith Jewell, J. Ernest Roberts, Gordon L. Townsend, S. W. Shaffer, R. H. Turlington.

Industrial Commission: S. Byron Towler, Chairman; James A. Privette, Norman F. Ross, S. L. Bobbitt.

**Insurance Industry Liaison:** J. B. Howell, Chairman; Charles H. Sugg, Dan Wright, J. B. Freedland, C. Don Gerdes.

Monitor: C. F. Clark, Jr., Chairman; John L. Matney, Neal Sheffield, Jr., Robert W. Clinard, William G. Ware, Jr., John S. Long, Harding W. Rogers, Jr., G. R. Nantz, William F. Riddle, John B. Hardy, Jr., Richard J. Citrini, Daniel B. Harrell, Jr., Daniel J. Floyd, F. H. Culbreth, Derwood L. Ashworth, Robert H. Poole, Jr., Junius H. Rose, Jr., T. R. Oldenburg, David E. Van Vleet, Riley S. Stallings, Jr., June H. Stallings, Jr., Frank M. Ramos, Robert M. Fox.

School Health: Glenn L. Hooper, Chairman; L. P. Megginson, Jr., G. Shuford Abernethy, Dennis S. Cook, Donald L. Allen.

Sports: William J. Wiggs, Chairman; J. A. Ward, D. Clyde Young, Jr., LeRoy K. Heath, Willard I. Herring, Arthur C. Riddle, Jr.

State Planning Committee for Dentistry: E. A. Pearson, Jr., Chairman; E. U. Austin, Joseph M. Johnson, Bennie D. Barker, John T. Hughes, J. A. Menius, J. Homer Guion, Donald L. Henson, James W. Bawden, Freeman C. Slaughter.

Visual Education: W. A. Mynatt, Chairman; Kenneth M. Ray, T. Edgar Sikes, Jr., Sandy C. Marks, Frederick G. Hasty.

North Carolina Association of Professions: (Directors) John H. Dixon (1968), James E. Furr (1968), E. Kent Rogers, III (1968), L. P. Megginson, Jr. (1969), Thomas M. Hunter (1969), Charles A. Jarrett (1969).

#### FIRST DISTRICT DENTAL SOCIETY 1967-68

#### **OFFICERS**

Cecil A. Pless, Jr., Asheville	President
Francis A. Buchanan, Hendersonville	President-Elect
Gene L. Reese, Boone	Vice President
William A. Mynatt, Asheville	Secretary-Treasurer
Clarence W. Canrobert, Jr., Conover	Editor

#### DELEGATES

Cecil A. Pless, Jr., Max W. Carpenter, William A. Mynatt, Francis A. Buchanan, Fenton S. Cunningham.

#### ALTERNATE DELEGATES

John T. Adair, Dwight B. Hord, Robert B. Litton, William S. Prevost, Jr., E. Kent Rogers, III.

#### **EXECUTIVE COMMITTEE**

Cecil A. Pless, Jr., F. A. Buchanan, M. W. Carpenter, C. W. Canrobert, William A. Mynatt, Fred N. Ogden, II, Gene L. Reese.

#### COMMITTEES

- Budget: William A. Mynatt, Chairman; F. A. Buchanan, M. W. Carpenter, H. H. Cole, Dixon L. Qualls.
- Clinics: William A. Current, Chairman; Richard P. Belton, Fred N. Ogden, II, Robert H. Owen, Jr., William G. Quarles.
- Constitution and Bylaws: J. W. Girard, Jr., Chairman; Ralph D. Coffey, C. B. Taylor.
- Ethics: C. Z. Candler, Jr., Chairman; F. S. Cunningham, M. M. Forbes, Auburn L. Poovey.
- Golf: Robert R. Hoffman, Chairman; J. G. Crowell.
- Hospitality: Thomas A. Morris, Chairman; Kenneth M. Ray, E. Kent Rogers, III, Carey T. Wells, Jr.
- Local Arrangements: Dixon L. Qualls, Chairman; William P. Cave, G. F. Daniel, Robert D. Garren.
- Membership: Gene L. Reese, Chairman; Frederick D. Shaw, Jerry W. Sowers.
- Necrology: Joseph P. Carpenter, Chairman; John D. Bost, Robert P. Hagaman.
- Nominating: M. W. Carpenter, Chairman; G. Shuford Abernethy, Samuel H. Isenhower.
- Program: F. A. Buchanan, Chairman; M. W. Carpenter, Pearce Roberts, Jr.
- Promotion and Attendance: William S. Prevost, Jr., Chairman; Joseph P. Carpenter, Wilburn L. Davis, Milton V. Massey, J. B. Roberson.

#### Relief: Walter E. Clark, Chairman; David G. Frye, John H. Shell.

#### SECOND DISTRICT DENTAL SOCIETY 1967-68

#### **OFFICERS**

W. Stewart Peery, Charlotte	President
W. Smith Kirk, Salisbury	
William H. Price, Monroe	Vice President
M. Lamar Dorton, Statesville	Secretary-Treasurer
Kenneth D. Owen, Charlotte	Editor

#### DELEGATES

W. Stewart Peery, W. Smith Kirk, M. Lamar Dorton, M. Stevenson Thurston, William G. Ware, Jr.

#### EXECUTIVE COMMITTEE

John M. Archer, Daniel B. Harrell, J. Harry Spillman.

#### COMMITTEES

- Auditing: Harding W. Rogers, Jr., Chairman; Henry C. Jurney, Joel Sherrod Williams.
- Constitution and Bylaws: T. G. Nisbet, Chairman; J. P. Bingham, Jr., Broadus E. Jones, Jr.
- Dental Health and Information: Luby T. Sherrill, Chairman; Barry G. Miller, James F. Rodgers.
- Ethics: Elliot R. Motley, Chairman; John L. Ashby, C. W. Bentley, Donald G. Cheek, Robert C. Gray, R. B. Harrell, W. Smith Kirk, Wade A. Sowers, Harold W. Thompson, Gilbert W. Yokeley.
- Insurance: Thomas L. Blair, Chairman; Joe V. Davis, Jr., W. Joseph Porter.
- Membership: William H. Price, Chairman; Boyce A. Brawley, Robert Carlough, Alfred D. Hurt, Jr., G. C. Stowe, Jr.
- Nominating: James A. Harrell, Chairman; Horace P. Reeves, Jr., William F. Yelton.
- Relief: A. R. Kistler, Chairman; J. Donald Kiser, J. P. Reece.
- Tar Heel Dental Seminar: E. F. Harris, Arrangements; William C. Bean, Entertainment; Keith L. Bentley, Exhibit; Paul A. Stroup, Jr., Hospitality; Gary Heeseman, Jr., Monitor; Frank H. Walker, Necrology; Frank A. Graham, Program; James B. Zuccarella, Projected Clinics; F. H. Culbreth, Publicity; O. J. Freud, Table Clinics.

#### THIRD DISTRICT DENTAL SOCIETY 1967-68

#### **OFFICERS**

Maurice B. Richardson, Albemarle	President
L. P. Megginson, Jr., High Point	President-Elect
W. Kenneth Young, Greensboro	
James B. Howell, Greensboro	Secretary-Treasurer
Richard M. Fields, Pleasant Garden	Editor

#### **DELEGATES**

C. Ray Holmes (1968); Bennie D. Barker (1969).

#### ALTERNATE DELEGATES

R. L. Bridger, R. L. Smith.

#### EXECUTIVE COMMITTEE

R. L. Smith (1970), Chairman; Robert L. Bridger (1968); Samuel T. Hart (1969).

#### COMMITTEES

- Arrangements: Deane Hundley, III, Chairman; Wilbur B. Bland, Jon W. Couch, C. Robert VanderVoort, R. B. Warlick, LeRoy K. Heath (Golf).
- Auditing: F. M. Stonestreet, Chairman; James A. Foust, Jr., Neal Sheffield, Jr.
- Children's Dental Health: Walter H. Moore, Chairman; Frederick M. Chandler, Brevitt Hook.
- Clinic: Troy B. Sluder, Jr., Chairman; John W. Atwater, Jr., John R. Lore.
- Ethics: N. W. Garrison, Chairman; Robert Lee Daniel, Charles W. Horton.
- Legislative: Ludwig G. Scott, Chairman; Leonard R. Cashion, A. Dwight Price.
- Membership: W. Kenneth Young, Chairman; Julian S. Trail, J. R., Whelless.
- Necrology: Robert M. Fox, Chairman; C. Franklin Almond, L. G. Page.
- Program: L. P. Megginson, Jr., Chairman; James A. Leggette, Jr., Owen Ray McKenzie.
- Public Education: John W. Menius, Chairman; Thomas R. Hinson, R. E. Richardson.
- Publicity: L. P. Megginson, Jr., Chairman; C. F. Clark, Jr., Marion L. Ralls, Jr.
- Relief: Daniel T. Carr, Chairman; E. M. Medlin, Henry V. Murray.

#### FOURTH DISTRICT DENTAL SOCIETY 1967-68

#### **OFFICERS**

Penn Marshall, Jr., Raleigh.	President
P. C. Purvis, Fairmont	
John N. Denning, Smithfield	
Harold E. Maxwell, Fayetteville	Secretary-Treasurer
Frederick G. Hasty, Fayetteville	Editor

#### **DELEGATES**

Penn Marshall, Jr., P. C. Purvis, James H. Edwards, Harold E. Maxwell, Walter H. Finch, Jr.

#### ALTERNATE DELEGATES

Lawrence A. Cameron, Robert H. Gainey, Jere E. Roe, Lloyd B. Stanley, Gordon L. Townsend.

#### EXECUTIVE COMMITTEE

Joseph M. Johnson, Chairman; Robert T. Byrd, John N. Denning, Penn Marshall, Jr., Harold E. Maxwell, P. C. Purvis.

#### COMMITTEES

- Auditing: Paul Fitzgerald, Jr., Chairman; J. Malcolm McAllister, S. B. Towler.
- Children's Dental Health: Jack B. Upchurch, Chairman; John B. Hardy, Jr., Burton A. Horwitz, William P. Tally, H. W. Windley, Jr.

- Clinic: Roy L. Earp, Chairman; Norman B. Grantham, Jr., Harold M. Hartsell, Frank B. McGrath, Jr., Mitchell W. Wallace, Jerry F. Wood.
- Constitution and Bylaws: Walter H. Finch, Jr., Chairman; E. D. Baker, L. D. Herring, J. Henry Ligon, Jr., William H. Oliver, J. B. Powell.
- Dental Education: C. W. Sanders, Chairman; Henry O. Lineberger, Jr., Lloyd B. Stanley.
- Entertainment and Banquet: Glenn F. Bitler, Chairman; F. Durant Bell, Richard S. Hunter, Lloyd B. Stanley.
- Ethics: Joseph M. Johnson, Chairman; Thomas G. Collins, P. E. Cotter, Glenn L. Hooper, Marcus R. Smith.
- Hospitality: D. W. Seifert, Jr., Chairman; Robert T. Byrd, L. D. Herring, J. Henry Ligon, Jr.
- Insurance: J. S. D. Nelson, Chairman; Thomas H. Fetzer, Benny W. Martin, Lawrence H. Pascal, D. W. Seifert, Jr.
- Local Arrangements: Henry O. Lineberger, Jr., Chairman; Daniel M. Lotz, Robert R. Morrison, Jr., Virgil McKee Morrison.
- Membership: John N. Denning, Chairman; John B. Hardy, Jr., Jerry O. Jernigan, William G. Lee, W. Keith Walker.
- Necrology: Robert T. Byrd, Chairman; Morris L. Bell, Marvin T. Jones, Jr., Lynn S. Mann, D. C. Woodall.
- Nominating: Robert T. Byrd, Chairman; L. D. Herring, J. Henry Ligon, Jr., William H. Oliver, Joseph M. Johnson.
- Program: P. C. Purvis, Chairman; Thomas G. Collins, Joseph T. Hunt, G. R. Nantz, Sanford W. Thompson, III, E. Ben Ward.
- Publicity: Richard S. Hunter, Chairman; Alex J. Biddell, W. Robert Caviness, Joseph S. Evans, Jr., William H. Oliver.
- Relief: S. L. Bobbitt, Chairman; Howard L. Allen, Lawrence A. Cameron, Glenn L. Hooper, L. J. Moore, Jr.
- Sports: David B. Masters, Chairman; Roy E. Gaines, Charles M. Kistler, William J. Lee.
- State Institutions: K. L. Johnson, Chairman; Eli J. Attayek, Edward G. Boyette, Jack A. Menius, Alton L. Smith.

#### FIFTH DISTRICT DENTAL SOCIETY 1967-68

#### **OFFICERS**

M. W. Aldridge, Greenville	President
T. S. Fleming, Tarboro	President-Elect
Walter S. Linville, Jr., Wilson	
James L. Cox, Goldsboro	
James A. Privette, Kinston	Editor

#### DELEGATES

M. W. Aldridge, T. S. Fleming, Walter S. Linville, Jr., Richard F. Hunt, Jr., Thomas B. Reid, Jr.

#### ALTERNATE DELEGATES

James L. Cox, James A. Privette, Matthew G. Delbridge, Junius H. Rose, Jr., Richard N. Hines, Jr.

#### EXECUTIVE COMMITTEE

M. W. Aldridge, Chairman; T. S. Fleming, Walter S. Linville, Jr., James L. Cox, James A. Privette, Matthew G. Delbridge.

#### COMMITTEES

- Arrangements: Garland R. Homes, Chairman; Wayne C. Anderson, Assistant Chairman; Sidney V. Allen, R. B. Barden, James E. Furr, D. B. Seitter, Jr., H. K. Thompson.
- Auditing: Alan L. Stoddard, Chairman; George K. Butterfield, Thomas W. Vinson, Jr.
- Committee on President's Address: Dan Wright, Chairman; Wayne C. Anderson, T. C. Boykin.
- Constitution and Bylaws: Z. L. Edwards, Chairman; William E. Kidd, E. K. Wright.
- Dental Caries: Bert B. Warren, Chairman; Pinkney B. Young, III; Johnnie H. Horton.
- Dental Relief: R. A. Daniel, Jr., Chairman; A. J. Bullard, Jr., Oscar H. Brown, H. F. Cofield.
- Disaster Preparedness: Roy A. Miller, Jr., Chairman; Royal J. Carson, B. G. Clark, Jr.
- Ethics: Darden J. Eure, Chairman; Sidney V. Allen, T. S. Fleming, H. W. Gooding, Coyte R. Minges.
- Membership: Walter S. Linville, Jr., Chairman; H. D. Browning, III, Charles S. Cooke, C. J. Demary.
- Mouth Guard: Charles E. Johnson, II, Chairman; C. D. Eatman, Wade T. Fields, William M. Heeden, Jr.
- National Children's Dental Health: Jay M. Collie, Chairman; Lewis P. Bratton, R. Hogan Gaskins, T. C. Hesmer, R. Willard Hinnant, Richard F. Hunt, Jr., E. Smith Jewell, Junius H. Rose, Jr., Samuel N. Trueblood.
- Necrology and Estate Affairs: Carle W. Mason, Jr., Chairman; B. McK. Johnson, J. M. Kilpatrick, M. M. Lilley.
- Nominating: Zeno L. Edwards, Jr., Chairman; Charles P. Godwin, W. L. Hand, Jr., James H. Lee, Walter S. Linville, Jr.
- Program: T. S. Fleming, Chairman; Mett B. Ausley, W. L. Hand, Jr., James M. Zealy.
- Resolutions: Donald L. Henson, Chairman; William C., Mercer, Jr., Phil S. Sanders.
- Seminar: Junius H. Rose, Jr., Chairman; Zeno L. Edwards, Jr., Larry G. Jorgensen, H. A. Nicholson, III.
- Study Club: George L. Edwards, Jr., Chairman; William J. Sherwood, Jr., Grover W. Smith.
- Table Clinics: Jack E. Silvers, Chairman; David H. Freshwater, Ben H. Houston, William E. Kidd.

#### ALPHABETICAL ROSTER OF MEMBERS

January 1, 1968

(Districts are indicated by number immediately following name.)

#### —A—

Abbey, Wallace D., Jr. (3) 1400 Georgia AveDurham	27705
Abernethy, C. E. (4) 502 Professional Bldg	27601
Abernethy C V (1) Powell St	28043
Abernethy David (I) Aberneiny Professional Diug	20001
Abernethy G Shuford (1) 407 Second St., N.WHickory	28601
A Jain Talam TP (1) 116 N College Ave Newton	28658
Adams C A Ir (3) Wachovia Bank Bldg Durham	27701
Adoma C A III (2) Wachovia Bank Bldg Durnam	27701
Adams, Roy G. (3) Box 188	28345
Adcock, George W., Jr. (4) North Main St. Fuquay Springs	27526
Agress, Bernard G. (2) Blalock BldgPilot Mountain	27041
Albright L. B (2) 311 Independence BlugCharlotte	28202
10 Medical Pavilion, 1800 W. Fifth St. Greenville	27225
Alexander, W. E. (3)  Alford, Frank (2) 1001 Liberty Life Bldg	28202
Allen, Don L. (3) UNC School of Dentistry	27514
Allen, Howard L. (4) Box 503	27536
Allen, Sidney V. (5) 3901 Oleander DriveWilmington	28401
Allen, Thomas I. (2) 816 Poindexter Drive	28209
Almond C Franklin (3) 234 Settle St Reidsville	27320
Alsnaugh Laurence S. (3) 1025 Madison AveGreensboro	27401
Anderson George D. (3) Box 228Southern Pines	28387
Anderson, G. N. (3) 206 Church St	27260
• • • • • • • • • • • • • • • • • • •	
Northwoods Professional PlazaJacksonville	28540
Anderson, Wayne C. (3) Northwoods Professional Plaza	27028
Andrews John L. Jr. (3) 316 Westwood Ave	21202
Androws Viotor I Ir (2) 715 Hospital St   Mocksylle	27028
Archer, John M., III (2) 126 Cottage PlaceCharlotte	28207
Archer, John M., III (2) 126 Cottage Place	27030
Ashrroath Dormond L. (1)	
Doctors Bldg., 912 Second St., N.E	27602
Attayek, Eli J. (4) Box 7588, Station B	2002
Attkisson, Wayne P. (5) 1210 Painter RoadOxon Till, Md. Atwater, Frank G. (3) 1202 Madison AveGreensboro	27403
Atwater, Frank G. (3) 1202 Madison Ave	27203
Atwater, John W., Jr. (3) 202 N. Cox St	27106
Ausland, Samuel 1. (2) 5125 Rey Motal Todamin Warsaw	28398
Ausley, Mett B. (5) Box 476	
Aycock, Charles B. (2) 6040 The Plaza Charlotte	28205
11,0001, 011111111111111111111111111111	

#### —B—

Banker, L. L., Jr. (2) 524 Professional BldgCharlotte	28202
Barber, A. D. (4) Box 406	27330
Darbor I D In (1)	21000
Barber, L. B., Jr. (1) Doctors' Park, 820 Fleming StHendersonville	90790
Doctors Park, 820 Fleming St	20139
Barden, R. B. (5) 916 S. 17th StWilmington	28401
Barker, Bennie D. (3) UNC School of DentistryChapel Hill	27514
Barker, C. T. (5) Drawer 2344, West New Bern Station. New Bern	28560
Barker, O. C. (1) Box 486	28802
Barkley Carl A (2) 740 Nissen Bldg Winston-Salem	27101
Barkley, Carl A. (2) 740 Nissen Bldg	27401
Barnes, Wilton H. (3) 121472 Market St. Greensbord	27401
Barnes, V. M. (5) Box 1426	27893
Barnhill, James H. (1) Box 306Hickory	28601
Barringer, Martin D. (2)	
Randolph Medical Center, 1928 Randolph RoadCharlotte	28207
Randolph Medical Center, 1928 Randolph RoadCharlotte Barringer, M. R. (1) Box 386	28658
Bartis Nicholas I (3) 2300 Friendly Road Greenshore	27403
Barton, Roger E. (3) UNC School of DentistryChapel Hill	27514
Barton, Roger E. (3) UNC School of DentistryChaper Hill	27014
Bass, Robert E. (3) 210 Gatewood Ave	27260
Baucom, Jimmie P. (2) 400-B Wakefield DrCharlotte	28209
Baucom, Thomas A. (2) 5232 Albemarle Rd	28212
Bawden, James W. (3) UNC School of DentistryChapel Hill	27514
Beam, R. S. (4) 610-C Woodburn Road Raleigh	27605
Bean, William C. (2) 2433 The Plaza	20205
Deall, William C. (2) 2433 The Flaza	20203
Beasley, Britton F. (5) Kinston Clinic	28501
Beavers, D. L. (2)	
Bowman Gray School of MedicineWinston-Salem	27103
Beavers, Franklin C. (2) 3734 Reynolda RdWinston-Salem Bebber, James V. (3) 720 Morgan RoadSpray	27106
Bebber James V (3) 720 Morgan Road Spray	27352
Beck, Charles H. (4) 1677 Owen DriveFayetteville	20204
Beck, Claries II. (4) 1011 Owen Dilve	20304
Becker, D. H. (1) 704 Flatiron BldgAsheville	28801
Bell, Franklin D. (4) 3117 Glenwood Professional Village Raleigh	27608
Bell, John T. (3) 4000 Dover RoadDurham	27707
Bell, Morris L. (4) 204 Sampson St	28328
Bell, Victor E. (4) 225 Hillcrest RoadRaleigh	27605
Bellois, W. B. (5) Box 1024Wilmington	28401
Belton, Richard P. (1) New Hope Professional BldgGastonia	20101
Denoin, Interiary 1. (1) New Trope Tropessional BriggGastoma	20032
Bencini, E. A. (3) 624 Quaker LaneHigh Point	21202
Benfield, Robert H. (2) 1509 Baugh BldgCharlotte	28202
Benfield, Robert H. (2) 1509 Baugh Bldg	27962
Bennett, Jack (2) Suite 204, Professional BldgWinston-Salem Benson, E. S., Jr. (5) 9 North 17th StWilmington	27103
Benson, E. S., Jr. (5) 9 North 17th St., Wilmington	28401
Bentley, C. W. (2) Hayes BldgNorth Wilkesboro	28659
Bentley, Keith L. (2) Box 486	28650
Biddell, Alex J. (4) Box 628Laurinburg	20038
Bidden, Alex J. (4) Box 626Laurinburg	20352
Biddell, F. H. (4) Laurinburg	28352
Biddix, Clarence F. (2) 225 N. Torrence St	28204
Bingham, J. P. (2) Bingham Clinic, East Center StLexington	27292
Bingham, J. P., Jr. (2) Box 124	27292
Bird, Charles W. (1) 1 Maple StSylva Bishop, E. L. (2) Graham Park Professional Bldg.	28779
Bishon F I (2) Graham Bark Professional Bldg	20113
120 Moching Division Charlette	00000
1630 Mockingbird Drive	
Bissette, M. D. (5) Box 1193Wilson	27893
Bitler, Glenn F. (4) 800 St. Mary's StRaleigh	27605
Black, A. R. (2) 608 Independence Bldg	28202
Blackburn, Charles A. (2) 810 O'Hanlon BldgWinston-Salem	27101
Blackman, W. W. (2)	21101
FOL W. W. (2)	0011
501 Weaver Bldg., 1917 W. Innes StSalisbury	28144
Blackwell, Glen E. (2) Box 518Salisbury	28144
Blair Mott P. (3) Box 348 Siler City	
	27344
Blair Thomas L. (2) 736 Nissen Bldg Winston-Salem	27344
Blair, Thomas L. (2) 736 Nissen BldgWinston-Salem	$27344 \\ 27101$
Blair, Thomas L. (2) 736 Nissen BldgWinston-Salem Blalock, C. A. (4) Box 295Wendell	$27344 \\ 27101$
Blair, Thomas L. (2) 736 Nissen BldgWinston-Salem   Blalock, C. A. (4) Box 295Wendell   Blanchard Manfred T (3)	27344 27101 27591
Blair, Thomas L. (2) 736 Nissen BldgWinston-Salem Blalock, C. A. (4) Box 295Wendell Blanchard, Manfred T. (3) Professional Bldg. Monroe StLeaksville	27344 27101 27591 27288
Blair, Thomas L. (2) 736 Nissen Bldg	27344 27101 27591 27288 28466
Blair, Thomas L. (2) 736 Nissen Bldg	27344 27101 27591 27288 28466
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Christian, Bill J. (2) Stratford Medical Center, 1st at Stratford	28144 27104 27705 28560 28739 27834 27705
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Fritz John R. (1) Bernard BldgHickory	28601
Froneberger, H. D. (1) 155 S. York St	28052
Frost. J. S. (3) 130 Union AveBurlington	27215
Frye, D. G., Jr. (1) 24 Second Ave., N.EHickory	28601
Fuerst, Herbert (5) Ricks BldgRocky Mount	27801
Funderburk, Ervin M. (2)	
Suite 501 Doctors Bldg., 1012 Kings Drive	28207
Furr. Curtis E. (2) 704 Kannapolis HighwayConcord	28025
Furr, James E. (5) 2138 Oleander DriveWilmington	28401
Furr, Walter E. (1) 59 Georgia RoadFranklin	28734

#### —G—

Gaines, Roy E. (4) 2013 Clark Ave	Raleigh	27605
Gainey, Robert H. (4) 2207 Bragg Blvd	Fayetteville	28303
Gaither, F. Glen (2) 131 N. Mulberry St	Statesville	28677
Galarde, A. J. (2) 1804 E. Fourth St	Charlotte	28204
Garber, M. R. (3) 719 Avondale Ave	Albemarle	28001
Garren, Robert D. (1) 5-D Doctors Park	Asheville	28801
Garrett, Thomas B. (3) 302 Lindsay St	High Point	27260
Garriott, Rosebud Morse (2) Box 68	East Bend	27018
Garrison, N. W. (3) 1617 Memorial Drive	Burlington	27215
Garriss Marcus A (5) Box 186	Weldon	27890
Gaskins R. Hogan, Jr (5) 615 College St.	Jacksonville	28540
Gav. S. P. (3) 1219 Magnolia St	Greensboro	27401
George, Robert A. (2) Box 1248	Mount Airy	27030
Georgiade, N. G. (3) Duke Hospital	Durham	27706
Gerdes C. Don (1) 412 Doctors Bldg	Asheville	28801
Getsinger, Duncan M. (3) 1408 Duke Univ. Road	Durham	27701
Gibson Jesse C. (4) Box 308	Rowland	28383
Gibson, Sam B. (3) 210 Gatewood Ave	High Point	27260
Gilbert, Robert H. (5) 2101 N. Heritage St	Kinston	28501
Gilbert, William B., Jr. (5) 700 Eighth St	New Bern	28560
Gilliam, F. E. (3) Box 448	Burlington	27215
Girard John W. Jr. (1)		
2 Doctors Park, 470 Biltmore Ave	Asheville	28801
Glenn. Edmond T. (1)	Boone	28607
Godwin, Charles P. (5) Box 294	Rocky Mount	27801
Goldwasser, J. M. (5)		
H. L. Green Bldg., 106½ W. North St	Kinston	28501
Gollobin, Arthur (5) Box 163	Elizabeth City	27909
Gollobin, Arthur (5) Box 163	Havelock	28532
Gooding, Herbert W. (5) 1001 W. Third St	Ayden	28513
Goodman, Alvin S. (2) Suite 320,		
Providence Medical Center, 1850 E. 3rd St	Charlotte	28204
Goodwin, C. J. (4) 320 Valley Road	Fayetteville	28305
Goodwin, Donald R. (3) 115 N. Fir St	Siler City	27344
Goodwin, William C., Jr. (5) 5348 Bellefield Road	Norfolk, Va.	23502
Gorman, Richard F. (5) 293-A Pine StSha	w AFB, S. C.	29152
Graham, C. A. (3) Liberty St	Ramseur	27316
Graham, C. A., Jr. (3) 120 Liberty St	Ramseur	27316
Graham, Frank R. (2) 1350 St. Julien St	Charlotte	28205
Graham, James B. (1) 815 E. King St.	Boone	28607
Graham, James E., Jr. (2) 1350 St. Julien St	Charlotte	28205
Graham, R. H. (1) Box 607	Lenoir	28645
Grahl, Carol L., Jr. (1) Box 46	Brevard	28712
Grant, Ben P. (1) Box 437	F'ranklin	28734
Grant, L. C., Jr. (5) Box 427	Jackson	27845
Grant, Robert W. (2) Box 455	Taylorsville	28681
Grantham, Norman B., Jr. (4) 710 Wilkens St		
Gray, Gus W. (3) UNC School of Dentistry	Chapel Hill	27514

Gray, Robert C. (2) Box 396	27892 28804 27403 27284 27909 27932 27701 28043 28303
Guion, J. Homer (2) 604 Doctors Bldg., 1012 Kings Drive	28207

#### —H—

Haddix, Guy E. (2) 226 Brookdale DriveStatesville	28677
Hagaman, Robert P. (1) Valdese General HospitalValdese	28690
Hagerty Edward H (1) Box 428 Belmont	28012
Hair, J. E. (1) Hair Bldg., Park St	28716
Hair, John S. (4) Box 684 Favetteville	28302
Hair, J. E. (1) Hair Bldg., Park St	27605
naie, J. P. (4) 1304 Ft. Bragg RoadFavetteville	28305
Hall, David K., Jr. (1) 105 Southside AveAsheville	28801
Hall, Norman C. (3) 441 S. Morgan StRoxboro	27573
Hall, Thomas A., Jr. (3) 5400 Friendly RoadGreensboro	27410
Haltiwanger, George A. (3) 204 E. Franklin StRockingham	28379
Haltiwanger, William L., Jr. (3) 204 E. Franklin St. Rockingham	28379
Hamer, Thomas N. (2) 415 Professional Bldg Charlotte	28202
Hamilton, A. L., Jr. (5) Box 149	28557
Hamilton, R. P. (4)	27511
Hamilton, A. L., Jr. (5) Box 149	28560
Hamrick, T. Hicks, Jr. (1) Box 248	28076
Hancock, James B. (4) 805 First Citizens Bank Bldg. Favetteville	28301
Hand, William L., Jr. (5) Box 335New Bern	28560
Hardy John B. Jr. (4) Box 1265 Oxford	27565
Hargrove, Albert W. (4) 603 Professional Bldg. Raleigh	27601
Hargrove, W. F. (1) 815 Oakland StHendersonville	28739
Harned, Robert J. (3) 809 Summit Ave., Box 6012 Greensboro	27405
Harrell, Daniel B., Jr. (2) 171 Spring St., N.WConcord	28025
Harrell, James A. (2) Box 688	28621
Harrell, R. B. (2) Box 688Elkin	28621
Harrelson, Henry C., Jr. (2) 1201 E. Morehead StCharlotte	28204
Harrill, C. H. (1) Box 566Lincolnton	28092
Harris, Archie L. (5) 1502 Princess St Wilmington	28401
narris, Edward F. (2) 4126 Park Road	28209
Harris, Franklin G. (4) Box 188	27330
Harris, Guy V. (3) 511 Trust Bldg. Durham	27701
Harris, Thomas H. (4) Wake County Health Department. Raleigh	27602
Hart, Samuel T. (3) Medical Center	27262
Hart, W. I. (5) Box 397Edenton	27932
Hartness, John D. (5) Box 708	27801
Hartness, J. F. (2) 454 Villa Grande Ave., SoSt. Petersburg, Fla.	33707
Hartness, William R., III (2) Box 306 Elkin	28621
Hartsell, Harold M. (4) 155 Spring St. Henderson	27536
Harwood, Brooks W. (3) Box 381 Mount Gilead	27306
Hasty, Frederick G. (4) 1611 Owen Drive	28304
Hatchert, Hubert E. (4) Box 42b	27511
Hatchett, C. Mitchell, Jr. (1) Box 5294	28803
Hawkins, Bruce H. (1) Box 786	28120
Hawkins, Charles B. (4) Box 29	28739
Hawkins, Ralph O., Jr. (2) Box 458Denton Hawkins, Reginald A. (2) 1218 Beatties Ford RoadCharlotte	27239
Haynes, Frank K. (2) 509 Independence BldgCharlotte	20200
trayrics, Frank K. (2) 505 independence bidgCharlotte	40404

Haynes, John E. (5) 328 Carolina BldgElizabeth City Head, Thomas J., Jr. (5) 3008 Oleander DriveWilmington	$27909 \\ 28401$
Healey, Kent W. (3) U. S. Army Dental DetachmentFt. Eustis, Va.	23604
Heath, LeRoy K. (3) 1431 Broad St. Durham Hedrick, Paul P. (1) Hedrick Bldg. Lenoir	27705
Hedrick, Paul P. (1) Hedrick BldgLenoir Heeden, W. M., Jr. (5) 106 Lee StGoldsboro	28645 27530
Heeseman Gary Jr (2) Suite 308 Randolph Medical Center.	
1028 Randolph Rd Charlotte	28207
Hefner, Allen R. (1) Box 367	28638
Holmong Cordon D (2)	
Town House Apartments, 11-D	27514
Helsabeck, C. Robert, Jr. (2) Box 38Rural Hall	27045
Holophook W I (2) Roy 425	27021
Hendren, Otis F. (1) Dixie Village Center	28786
Henshaw William R (1) 207 Lee St. Sanford	28150
Henson, David E. (1) 202 Nantahala BldgFranklin Henson, Donald L. (5) Box 1042Kinston	28734
Henson, Donald L. (5) Box 1042	28501
Henson, J. L. (3) 1029 Madison Ave	28681
Herman, Ralph E. (2) Taylorsville Herndon, Claude H. (3) 100 Main St. Jamestown	27282
Herren, James M. (1) 107 A Arrowhead RoadFt. Benning, Ga.	31905
Herrin, Hermon K. (1) 1204 Fairfield Drive	28052
Herring, L. D. (4) 810 Professional BldgRaleigh	28328
Herring, W. I. (4) Box 626	27893
Hester, Elliott M. (3) 624 Quaker Lane	27262
Higley, L. B. (2) 408 Estes Drive Chapel Hill	27514
Hill, Brian P. (2) 702 Doctors Bldg., 1012 Kings Drive. Charlotte Hill, Douglas G. (5) 208 Glenwood AveKinston	28207
Hill J N Jr (1) 412 Hiawassee St Murphy	28906
Hines, Richard N., Jr. (5) 437 S. Broad St. Edenton Hinkle, David R. (2) 1182 W. Fourth St. Winston-Salem	27932
Hinkle, David R. (2) 1182 W. Fourth St. Winston-Salem	27101
Hinnant, R. Willard (5) 4 Colonial Square, W. Ash St. Goldsboro	27530 27215
Hinson, Thomas R. (3) Box 1143	28144
Hinson, William P., Jr. (3) High Point Medical Center. High Point Hoard, J. S. III (5) 2000 A Fairview Circle	27262
Hoard, J. S. III (5) 2000 A Fairview Circle	27886
Hodges, Johnnie D., Jr. (4) Doctors BldgSmithfield Hodgin, O. R. (2) Box 366Thomasville	27360
Hoffler, William H., Jr. (2)	21300
2125 New Walkertown Road Winston-Salem	27101
Hoffman Milo J (2) 1600 E. Fifth St Charlotte	28204
Hoffman, Robert R. (1) 808 Flatiron Bldg. Asheville Holland, J. M. (2) Box 348. Statesville	28677
Holland Murry W (3) Chase Ave. Chapel Hill	27514
Holliday, R. H. (2) Box 849Thomasville	27360
Hollis, Robert H. (5) 412 Murchison BldgWilmington	28401
Holly, Norman J. (1) 1000 Highland Ave	28739
Holmes, C. Ray (3) 5400 Friendly Road	28805
Holshouser, L. C. (2) Box 535Rockwell	28138
Holt, Harold M. (3) Box 20905	27420
Holt, Leonidas C. (3) 2234 Golden Gate DriveGreensboro	
Holzbach, Richard L. (4) 2207 Bragg BlvdFayetteville Homes, Garland R. (5) 234 W. Main StWashington	203U3 27880
Honeycutt, Wallace B. (2) Box 89Statesville	28677
Hood, J. Sidney (2) 903 E. Center St. Lexington	27292
Hook, Brevitt (3) South Fifth St	
Hooks, Oscar (5) 115 Whitehead AveWilson	27893
Hooper, Glenn L. (4) 601-C West Broad St	28334
Hoover, Charles W. (2) 21 E. Center St. Lexington	27292
Hoover, Dan C. (2) 709-10 Baugh Bldg., 112 S. Tryon St Charlotte	28202

Hoover, R. G. (2) 1529 Elizabeth Ave	27101 28090 28086 08753 27260 27932 27591
Houser, James B., III (2) 401 Doctors Bldg., 1012 Kings Drive	28207 27530 27889 28159
Howell, James B. (3) 917 N. Elm St	28803 28697 27573 27312 27330
Hull, P. C., Jr. (2) 601 Doctors Bldg	28207 28207 28315 27401 28024
Hunt, Richard F., Jr. (5) 420 Hickory St	$27401 \\ 27605 \\ 27536 \\ 28110$
Hussey, T. E. (3) Box 258Star 2	27356
Icenhower, Earl C. (1)	27882 27104 27403 28204
— <b>J</b> —	
Jackson, David S. (5) Box 37	27101 27605 28328
Suite 504, Hawthorne Medical Center	27263 27106 28334 28334 28337 28401 27893

Johnson, C. B. (5)	28540
Johnson, Carol H. (1) Box 168,	
Johnson, Carol H. (1) Box 100,	09115
Children's Hospital, 300 Longwood Ave	02113
Johnson, Charles B. (5) Box 659	28560
Johnson Charles E. II (5) Water StreetBelhaven	27810
Johnson, Clemuel M. (4) Box 487Elizabethtown	28337
Johnson, G. Terry (2) Box 98Sparta	28675
Johnson, G. Terry (2) Box 30	28210
Johnson, James B. (2) Doctors Clinic, Freedom Village. Charlotte	20210
Johnson, Joseph M. (4) 426 King StLaurinburg	28352
Johnson Kenneth I. (4)	
302 Alexander Bldg 133 Favetteville St. Raleigh	27601
Tohnson M. L. (4) Roy 819 Whiteville	28472
Johnson, Numa C., Jr. (3) 624 Quaker LaneHigh Point	27262
Johnson, Numa C., 51. (5) 624 Quaker Lane	20211
Johnson, Ronald L. (2) 324 Canyon Trail	20211
Johnson, T. George, Jr. (1) Western Carolina Center. Morganton	28655
Tohnson W H (5)	27962
Johnson W Harrell (3) Box 307 Southern Pines	28387
Johnston, Ben M. (3) Box 528	27253
Johnston, Charles M. (2) 2016 Creshy St. Charlotte	28211
Johnston, Charles M. (2) 2916 Crosby St. Charlotte Jones, B. E., Jr. (2) 109 N. Church St. Concord	20211
Jones, B. E., Jr. (2) 109 N. Church St. Concord	20020
Jones, Charles E. (1) 252 Charlotte St	28801
Jones, Clifford B. (5) 204 S. Poindexter StElizabeth City	27909
Jones, Clifford B., Jr. (5) 204 S. Poindexter St. Elizabeth City	27909
Jones, Clinton M. (2) 202 E. Innes St. Salisbury	28144
Jones, E. D. (1) Jefferson Ave	28604
Jones, E. D. (1) Jefferson Avewest Jefferson	20034
Jones, Marvin T., Jr. (4) Apex	27502
Jones, Paul E. (5) Box 6Farmville	27828
Jones, Rufus S. (4) Warrenton	27589
Jones, William R. (5) 83 Diana DriveJacksonville	28540
Jordan, J. F. (4) Raeford	28376
Julian, J. F. (1)	20010
Jordan, John J. (2) 1201 E. Morehead St. Charlotte Jorgensen, Larry G. (5) 608 E. Tenth St. Greenville Jurney, Henry C. (2) Box 616 Huntersville	07004
Jorgensen, Larry G. (5) 608 E. Tenth StGreenville	27034
Jurney, Henry C. (2) Box 616Huntersville	28078
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	27705
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham	27705
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham	
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg 612 Pasteur Drive Greensboro	27403
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg 612 Pasteur Drive Greensboro	27403
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg 612 Pasteur Drive Greensboro	27403
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3)  Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3)  Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3)  Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28540 28144 27889 01433 27871 27203
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28368
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28368
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28144 28144
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28144 28205
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28144 28144 28144 28205 27701
Kanoy, B. Edmond (3) Professional Bldg., 1200 Broad StDurham Karesh, Harry A. (3) Freeman Bldg., 612 Pasteur Drive	27403 28655 28806 28202 28401 28337 27608 28209 28207 27510 28801 28540 28144 27889 01433 27871 27203 28358 28144 28144 28144 28205 27701

Kiser, Winford J. (3) 203 BoulevardHigh Point	27262
Kistler, A. R. (2) Box 314Monroe	28110
Kistler, C. D. (3) Box 575	
Kistler, Charles M. (4) Suite 103, 1300 St. Mary's St. Raleigh	27605
Kitts, Warren H. (1) Box 86	28738
Kluttz, Robert F. (2)Landis	28088
Kornegay, J. M. (5) Box 155Warsaw	
Kornegay, Thomas A. (3) 201 N. Main StTroy	27371
Kramer, Donald R. (3) UNC School of DentistryChapel Hill	27514
Kriegsman, Robert M. (3) 1011 Madison AveGreensboro	27401
Kyles, C. Paul (1) Box 126	

#### —L—

Total II-II	05045
Lamb, Lewis E., Jr. (2) Rt. 1Rural Hall	27045
Lamb, Lewis E., Jr. (2) Rt. 1	27403
Large. Nelson D. (2) VA HospitalRichmond, Va.	23225
Lasley, J. T. (3) 303 Jefferson BldgGreensboro	27401
Laton, Joseph F. (3) 123 W. Franklin St	27514
Lauten, J. J. (3) 811 N. Elm St. Greensboro	27401
Lauten, J. J. (3) off N. Enn St. Greensburg	27701
Lawrence, Eugene W., Jr. (1) 202 Nantahala BldgFranklin	20734
Lawrence, Jack D. (1) Appalachian Theatre BldgBoone	28607
Lazenby, Glenn A., Jr. (3) 1304 Broad StDurham	27705
Leary, Thomas E. (5) 308 W. Main StAhoskie	
Ledbetter, C. B. (4) 217 Bryan Bldg., Cameron Village. Raleigh	27605
Lee, Douglas D. (4) 504 First Union Bank BldgFayetteville	28301
Lee, James H. (5) 308 N. Taylor StGoldsboro	27520
Lee, James H. (3) 300 N. Taylor St	27330
Lee, John G. (2) Box 227Boonville	27011
Lee Lewis W. (5) 511 Raleigh RoadWilson	27893
Lee, William G. (4) 312 S. Third St	27577
Lee, William J. (4) Ridgewood Shopping CenterRaleigh	27607
Leggette, James A., Jr. (3) 1014 Lamond AveDurham	27701
Lehmann, James H. (4)	
Lehmann Professional Bldg., 216 Hawkins AveSanford	27330
Lemler, John F. (1) 675 Biltmore AveAsheville	28803
Lentz, B. P. (2) 424 Professional Bldg	20000
Lentz, B. P. (2) 424 Floressional Blug. Charlotte	20202
Lessem, Robert B. (4) Box 394Fayetteville	20302
Levine, H. H. (2) 537 Nissen BldgWinston-Salem	27101
Lewis, James B. (1) 111-B West Third AveGastonia	28052
Lewis, O. Preston (1) Box 146	28086
Lewis William H. Jr. (3) Box 312 Dalton St. Madison	27025
Libby Robert H (2) 1524 Harding Place Charlotte	28204
Ligon, I. H. Ir. (4) 800 St. Mary's St. Raleigh	27605
Libby, Robert H. (2) 1524 Harding Place	27974
Lindah Day I (2) INC Cabal of Daytisty Charl III	27514
Lindani, Roy L. (3) UNC School of DentistryChaper Hill	27514
Lineberger, H. O., Jr. (4)	07000
Glenwood Professional Village, 3133 Essex CircleRaleigh	27608
Lineberry, Donald E. (3) 711 Dogwood LaneGuilford College	27410
Linville, Walter S., Jr. (5) Corner Pine & Greene StsWilson	27893
Lipe, E. W. (2) 301 Idlewood Drive	28081
Little James E. (2) 242 E. Broad St. Statesville	28677
Little, Perry P. (3) 628 E. Washington DriveHigh Point	27260
Little, T. A. (3) Rt. 2, Box 59	27705
Litton, Robert B. (1) Box 1346Shelby	29150
Litton, Robert B. (1) Box 1340	20130
Lomax, Bobby A. (2) 116 Statesville Blvd	28144
Long, Durel G. (3) 914½ Gorrell St	27406
Long, Herbert S. (3) Box 246Graham	27253
Long, John S. (2) 162 Forsyth Medical ParkWinston-Salem	27103
Long. Robert (2) 321 N. Center St. Statesville	28677
Long Robert E. (3) Box 326 Roxboro	27573
Lore, John R. (3) 609 Walter Reed DriveGreensboro	27403
Lotz, Daniel M. (4)	_,,,,,
Glenwood Professional Village, 3133 Essex CircleRaleigh	27608
Love, James H. (1) 102½ BroadwayBlack Mountain	28711
Love, vanies II. (1/ 102/2 Dioaway	20111
Lowry, Tolbert W. (1) 2205 W. PamelaGastonia	40004

#### --Mc--

MacKay, Noel C. (2) 2101 E. Independence BlvdCharlotte	28205
McAllister J Malcolm (4) 303 Professional Bldg Raleigh	27601
McAnally, C. W. (3) Madison	27025
McAnally, C. W. (3) Madison McBrayer, Gerald F. (1) Box 995 Morganton McBrayer, William F. (1) 809 N. Main St. Rutherfordton	28655
McBrayer William F (1) 809 N Main St Rutherfordton	28139
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McCall, Clyde N. (1) Box 396Stanley	28164
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Dudington Dontal Clinia ADO Novy York Novy York	00001
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McGuire, Alice Patsy (1) Box 501	28779
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McIntosh James N (5)	2.200
81st Tactical Hospital APO New York N V	09755
McIntosh, James N. (5) 81st Tactical Hospital	27262
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Nash. Ge	lenn R. (4) 405 W. 27th StLumberton eorge T. (2) 2506 Beatties Ford RoadCharlotte	28208
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Nash, Ge Nash, Ri Nelson, J 304 Lis Nelson, T Newman, Newton.	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514
Nash, Ge Nash, Ri Nelson, J 304 Lis Nelson, P Newman, Newton, Nichols, J	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514
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Nash, Ge Nash, Ri Nelson, I Nelson, I Nelson, I Newton, Nichols, I Nichols, I	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306
Nash, Ge Nash, Ri Nelson, I Nelson, I Nelson, Newman, Newton, Nichols, I Nicholson Dental	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306
Nash, Ge Nash, Ri Nelson, I Nelson, I Nelson, Newman, Newton, Nicholso, I Nicholson Dental Nicholsor	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677
Nash, Ge Nash, Ri Nelson, I Nelson, I Nelson, Newman, Newton, Nicholso, I Nicholson Dental Nicholsor	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677
Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, J Newton, Newton, Nicholsor Dental Nicholsor Nicholsor	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608
Nash, Ge Nash, Ri Nelson, J 304 Lis Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379
Nash, Ge Nash, Ri Nelson, J 304 Lis Nelson, F Newman, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nicholsor Nicholsor Nifong, F	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379
Nash, Ge Nash, Ri Nelson, I Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nicholsor Nicholsor Nicholsor Nicholsor	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012
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Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nifong, I Nisbet, T 324 Do Nissen, J Nixon, F	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909
Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nifong, I Nisbet, T 324 Do Nissen, J Nixon, F	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909
Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nifong, I Nisbet, T 324 Do Nissen, J Nixon, F	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909
Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, I Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nifong, I Nisbet, T 324 Do Nissen, J Nixon, F	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909
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Nash, Ge Nash, Riv Nelson, J 304 Lig Nelson, J Newson, Newson, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nicholsor Nisbet, T 324 Do Nissen, J Nisson, H Nison, H	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909
Nash, Ge Nash, Ri Nelson, J 304 Lig Nelson, J Newman, Newton, Nicholsor Dental Nicholsor Nicholsor Nicholsor Nicholsor Nisbet, T 324 D Nissen, I Nixon, H Noblitt, I	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 227012
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Nash, Ge Nash, Riv Nelson, Janas Allian Nelson, Janas Allian Newman, Newman, Newman, Newman, Nicholson Dental Nicholson Nicholson Nicholson Nicholson Nishet, Janas Allian Nisbet, Taras Allian Nisbet, Taras Allian Nisbet, Iaras Allian Oakley, 206 Bry, Ogden For	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909 28150
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Nash, Ge Nash, Riv Nelson, Janas Allian Nelson, Janas Allian Newman, Newman, Newman, Newman, Nicholson Dental Nicholson Nicholson Nicholson Nicholson Nishet, Janas Allian Nisbet, Taras Allian Nisbet, Taras Allian Nisbet, Iaras Allian Oakley, 206 Bry, Ogden For	lenn R. (4) 405 W. 27th St	28208 27104 27605 27514 27605 27215 27514 28306 78433 28677 27608 28379 27012 28207 27101 27909 28150
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Detrois D. F. (2) 1002 Isings Drive Challette	00000
Petree, R. E. (2) 2020 Lombardy Circle	28203
Pharr, John R. (2) 1556 Stanford Place	28207
Phillips, Guy M. (2) 281 Canterbury TrailWinston-Salem	27104
Phillips, Kenneth R. (2)	
Suite 170, Forsyth Medical ParkWinston-Salem	07100
Suite 170, Forsym Medical Fark	27103

Pierce, T. Carlton (3) 5004 Hampton Road	401 150 549 340 801 401 401 905 530 601 601 739 207 609 328
Prevost, William S., Jr. (1) 106 Broadview RdWaynesville 28 Price, A. Dwight (3) 206-208 Lennox Bldg	786 514 601 110 301 501 016 621 712 508 565
Purvis, P. C. (4) 304 Iona StFairmont 28	340
Qualls, Dixon L. (1) 62 Crowell Rd	052
—R—	
Ralls, Marion L., Jr. (3) 3200 Friendly Road       Greensboro 27         Ralph, W. T. (5)       Belhaven 27         Ramos, Frank M. (3) 509 S. Duke St.       Durham 27         Ramsey, Arthur M. (1) Box 306       Marshall 28         Rankin, W. W. (4) 406 Professional Bldg       Raleigh 27         Ransom, Robert K. (1)       Burnsville 28         Rasberry, William E. (5) Box 278       Grifton 28         Ratton, Thomas G. (2) 27 E. Center St.       Lexington 27         Ray, A. Graham (3) Edgeworth Bldg       Greensboro 27         Ray, Kenneth M. (1) 569 Merrimon Ave       Asheville 28         Ray, Moses A. (5) Box 626       Tarboro 27         Raymer, J. L. (1) Box 1297       Shelby 28         Raynor, Bobby C. (4) Box 365       Garner 27         Reece, John F. (1) Box 816       Lenoir 28         Reece, John F. (1) Box 544       Concord 28         Reed, Charles B. (2) 714 Herman Place       Fort Bragg 28         Reese, Gene L. (1) Box 271       Boone 28	753 601 714 530 292 401 804 886 150 529 514 645

Reeves, Horace P., Jr. (2) 225 N. Torrence StCharlotte	28204
Reeves, Horace P., Jr. (2) 225 N. Torrence StCharlotte Reeves, James D. (1) 14 McGeachy BldgAsheville	28803
Rehm. Jerome G. (2) Suite 902, 1012 Kings DriveCharlotte	28207
Reich, E. H. (2) 2100 Old Lexington RoadWinston-Salem	27107
Reid, Curtis S. (2) 329 Grove Park AveWinston-Salem	27103
Reid, Thomas B., Jr. (5) 617 College StJacksonville	28540
Renfrow, R. R. (4) 1304 Fort Bragg RoadFayetteville	28305
Reynolds. John A. S. (2)	20000
922 Doctors Bldg., 1012 Kings Drive	20207
922 Doctors Blag., 1012 Kings Drive	20207
Rhyne, Howard S. (1) 211 W. Main Ave	20002
Rich, C. F. (1) 812 Flatiron Bldg	28801
Richardson, Maurice B. (3) 230 W. North StAlbemarle	28001
Richardson, R. E. (3) 403 Westwood DriveChapel Hill	27514
Riddle, A. C., Jr. (1) 675 Biltmore AveAsheville	28803
Riddle, William Frederick (2) 1415 W. First StWinston-Salem	27104
Ridenhour, C. E. (2) Carolina BldgKannapolis	28081
Rider, Ernest A. (2) 4575 Woodlark Lane	28207
Riggs, A. F. (5) Box 271Elizabeth City	27909
Roberson, Joe B. (1) 1087 Hendersonville RoadAsheville	28803
Roberson, Robert W. (4) 1715 McGougan RoadFayetteville	28303
Roberts C. F. (4) 1713 McGougan RoadFayettevine	20000
Roberts, C. E. (4)	27015
Roberts, J. Ernest (3) Medical VillageBurlington	2/210
Roberts, Pearce, Jr. (1) Suite 410 Doctors BldgAsheville	28801
Robinson, Charles F. (2) 3901 Independence BlvdCharlotte	28205
Robinson, Ernest L. (4) Box 1146Lumberton	28358
Rodgers, James F. (2) Box 182Statesville	28677
Roe, Jere E. (4) 404 Ligon Bldg., 800 St. Mary's StRaleigh Rogers, E. Kent, III (1) 950 Tunnel RoadAsheville	27605
Rogers, E. Kent, III (1) 950 Tunnel Road	28805
Rogers Harding W. Jr. (2)	
Professional Bldg., 511 E. Statesville AveMooresville	28115
Rogers, John T. (2) Freedom Village	28208
Rogers, Julian R. (3) 1114 Grove StGreensboro	27403
Rogers, Jurian I. (3) 1114 Grove St. Greensbord	20105
Rogers, Russell J., Jr. (2) Box 397	20100
Rose, Junius H., Jr. (5) 2101 N. Heritage St. Kinston Rosemond, Julian B. (5) Box 574. Wilson	28501
Rosemond, Julian B. (5) Box 574Wilson	27893
Rosenbaum, Jerry H. (3) UNC School of Dentistry Chapel Hill	27514
Ross, Grady L. (2) 1908 E. 7th St	28204
Ross, Heywood (2) 219 Elmhurst Road	28209
Ross, Ledyard E. (5) 602 E. Tenth StGreenville	27834
Ross, Norman F. (3) Box 3806, Duke Medical CenterDurham	27706
Ross, Thurman J. (3) 910 Green St	27701
Rowe, O. D. (1) Box 649	28752
Rudder, William L. (5) Box 28Beaufort	28516
Russ, Bobby M. (5) 413 Murchison BldgWilmington	28401
Russ, Bobby M. (9) 415 Marchison BlagWillington	20101
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—S—	
Sager, Robert H. (4)	
Hart Bldg., Glenwood Professional VillageRaleigh	27608
Sain, H. T. (1) Box 736	28655
Sams, Roy B. (1) Box 372	28754
Samuel, Michael D. (3) 320 Westwood Ave High Point Sanders, Cleon W. (4) Box 368Benson	27262
Sanders, Cleon W. (4) Box 368 Benson	27504
Sanders, Paul D. (4) 5324 Williamsburg DriveFayetteville	28304
Sanders, Phil S. (5) 2101 N. Heritage St	28501
Sapp, Baxter B., Jr. (3) Box 3806, Duke Medical CenterDurham	27706
Sapp, Hubert B. (2) 57 E. Cliff Drive	28025
Sappington, Roy R., Jr. (4) 1111 Clarendon StFayetteville	
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Scherer, Richard F. (2)	
Suite 187 Professional BldgWinston-Salem	27103
Schiebel, E. C. (2) Box 978Elkin	
	90001
Schmucker, Ralph (2) 801 Liberty Life Bldg	
Schneider, John J. (1) Dental Dept.,  Marine Corps Recruit Dept	28202

Schneider, N. J. (3) 52 Willow Terrace	27514
Schneider, William G. (4)	5.011
Schielder, William G. (4)	0=00=
Ridgewood Medical Bldg., 3518 Wade AveRaleigh	27607
Scott, Ludwig G. (3) 713 Memorial DriveBurlington	27215
Sears, T. H., Jr. (3)	
240 Embassy Apt., 3148 Cache RoadLawton, Okla.	79501
240 Embassy Apt., 3146 Cache RoadLawton, Okia.	13301
Seifert, D. W., Jr. (4) York Bldg., 2016 Cameron StRaleigh	27605
Seitter, D. B., Jr. (5) 1 North 16th StWilmington	28401
Self, Fred L. (1) Box 127Lincolnton	
Self, Isaac R. (1) Box 127Lincolnton	28002
Sell, Isaac R. (1) Box 127	20092
Sessoms, W. W. (3) 1011 Madison AveGreensboro	27401
Shaffer, S. W. (3) 421-4 Southeastern Bldg	27401
Shankle Robert J (3) UNC School of Dentistry Chanel Hill	27514
Shapiro, Eugene N. (1) 48 Battery Park Ave	20001
Shapiro, Eugene N. (1) 40 Battery Fark AveAsheville	20001
Shaw, Frederick C. (1) 328 E. Harper AveLenoir	28645
Sheffield, Neal (3) 304 Dixie BldgGreensboro	27401
Sheffield Neal Jr (3) 902 N Elm St Greensboro	27401
Shell, John H. (1) Rt. 1, Box 164Valdese	20600
Sileli, John H. (1) Rt. 1, Box 104vardese	20090
Shelton, Clavis O. (2) Box 57	27052
Shelton, Vader, Jr. (1) Box 698	28619
Sherman, Clarendon F. (2) Box 325	28072
Sherrill, Claude A., Jr. (1) Suite 16-W Doctors BldgAsheville	20011
Sherrin, Claude A., Jr. (1) Suite 10-w Doctors BidgAsheville	20001
Sherrill, Luby T., Jr. (2)	
Mecklenburg Co. Health Dept., 1200 Blythe BlvdCharlotte	28203
Sherwood William J. Jr. (5) 918 Market St. Washington	27889
Sherwood, William J., Jr. (5) 918 Market StWashington Shoffner, Clarence L. (5) Box 266Weldon	27000
Shormer, Clarence L. (3) Box 200	27090
Sholar, Norman P. (2) Box 180	28115
Short, L. H. (2)	
303 Doctors Bldg., 1012 Kings Drive	28207
Sigmon, James W. (3) 1601 Cornwallis DriveGreensboro	20201
Sigmon, James W. (3) 1601 Cornwallis DriveGreensporo	27408
Sikes, T. E. (3) 1011 Madison AveGreensboro	27401
Sikes T Edgar Jr (3) 1100 Olive St Greensboro	27401
Silvers, Jack E. (5) 8 Colonial Square	27530
Sirvers, sack L. (9) 0 Colonia Square	00011
Simendinger, William H., Jr. (2) 5850 Lansing Drive. Charlotte	28211
Simkins, George C. (3) 500 S. Benbow Road	27401
Simpson, David H. (1) 406 S. Chester St. Gastonia	28052
Slack, James B. (5) Box 107Pinetops	27864
Clarification F. C. (9) DOA 107	21004
Slaughter, F. C. (2) 201-05 Professional BldgKannapolis	28081
Sloop, W. M. (1) Box 258Crossnore	28616
Slott, E. F. (3) Medical Village, Vaughn RoadBurlington	27215
Sluder, Troy B., Jr. (3) 2109 N. Lake Shore DriveChapel Hill	27514
Student, Troy D., 91. (9) Double of Outball and the Chapter Hill A	41314
Smiley, Gary R. (3) Dept. of Orthodontics, UNC School of Dentistry	
UNC School of Dentistry	27514
Smith, Amos H. (2) Box 242Lexington	27292 -
Smith Alton I. Ir (4) Dorothea Div Hospital Raleigh	27602
Smith, Alton L., Jr. (4) Dorothea Dix HospitalRaleigh Smith, Clayton B., Jr. (5) 2408 Doctors CircleWilmington	2002
Smith, Clayton B., Jr. (3) 2408 Doctors Circle	28401
Smith, Everett L. (4) 820 Professional BldgRaleigh	27601
Smith Fred J (2) 774 Forsyth Medical Park Winston-Salem	27103
Smith Grover W (5) Kinston Clinic Kinston	28501
Smith, Grover W. (5) Kinston Clinic	00401
Sillin, James H. (5) 703 Murchison Blag	28401
Smith, James R. (2) 4885 Oglethorpe Place	28209
Smith, John Watson, Jr. (3) Box 647 Pinehurst 5	28374
Smith, Junius C. (5) 502 Murchison Bldg. Wilmington Smith, Lynn H. (3) 106 E. Northwood St. Greensboro	28401
Smith Lynn II (2) 100 E Marthur I (4)	20401
Smith, Lynn H. (3) 106 E. Northwood StGreensboro	27401
Smith, Marcus R. (4) Box 637Raeford	28376
Smith, Newton (4) 1900 Bragg Blvd. Favetteville:	28303
Smith, Ray H. (1) Box 155	28021
Cmith Dobout I (2) Day 207	00041
Smith, Robert L. (3) Box 287	2800I
Smith, Samuel I. (5) 1048 E. 10th StRoanoke Rapids	27870
Smith, Thomas A. (2) 140 Lockland Ave	27103
Smith, Thomas K. (4) 5221 Hornbeam RoadFayetteville	20204
Child Nomic D (4)	40004
Smith, Vonnie B. (4)	
3121 Glenwood Professional Village Raleigh	27608
3121 Glenwood Professional Village	$\frac{27608}{27801}$
Smithson, T. W. (5) 205 Forest Hill AveRocky Mount S	27801
3121 Glenwood Professional Village	$27801 \\ 27565$

Snoderly, Robert M. (1) Rt. 4, Box 23Waynesville	28786
Snyder, Harry G. (2) Central Piedmont Community College,	
1141 Fliesboth Ave	00004
1141 Elizabeth Ave	28204
Snyder, Jerald M. (1) 408 E. Main StOld Fort	28762
Snyder, Kenneth Ray (2) 21 Clemmonsville Road. Winston-Salem	27107
Sockwell, C. L. (3) UNC School of Dentistry	27514
Solomon Marshell H (2) 1001 N Flm St Cronghoro	27401
Solomon, Marshall H. (3) 1001 N. Elm StGreensboro Southard, F. J. (2) 101½ S. Main StKernersville	27401
Southard, F. J. (2) 101½ S. Main StKernersville	27284
Southworth, J. D. (3) 1219 Magnolia StGreensboro	27401
Sowers, Jerry W. (1) Villa Park Shopping CenterConover	28613
Sowers, Wade A. (2) Court SquareLexington	27292
Sowiton John D. (2) UNIC Coheal of Dontistry. Characteristic	27232
Sowter, John B. (3) UNC School of Dentistry	27514
Spear, Herbert (5) Box 615Kinston	28501
Spence, W. M. (5) 506 N. Road StElizabeth City	27909
Spencer, John R. (2) 820 W. Henderson StSalisbury	28144
Spencer, William R. (4)	27507
Spencer, william K. (4)wake Forest	21301
Spillman, J. Harry (2) 140 Lockland AveWinston-Salem	27103
Spoon, Riley E., Jr. (2) Suite 203 Professional Bldg.,	
Cloverdale Ave. Winston-Salem	27103
Springer, Dennis H. (2)	2.100
Springer, Dennis II. (2)	
824 Doctors Bldg., 1012 Kings Drive	28207
Sproul, J. Fred (4) 616 Gloucester RoadGoldsboro	27530
Spurlin, Max L. (1) 102 Brown AveHazelwood	28738
Stallings Iune H Im (9)	
900 Broad St., Cor. Green & BroadDurham	0==0=
900 Broad St., Cor. Green & Broad	27705
Stallings, Riley S., Jr. (3) 111 Corcoran St	27701
Stamper, Clifford M. (1) Box 85Banner Elk	28604
Stanford, A. R. (3) 404 Guilford Bank BldgGreensboro	27401
Stanlard, 11. 11. (a) 404 Guillord Baile Bidg	27401
Stanley, Lloyd B. (4) 800 St. Mary's St. Raleigh Steadman, Paul C. (3) 636 E. Walnut St. Statesville	27005
Steadman, Paul C. (3) 636 E. Walnut StStatesville	28677
Steelman, S. H. (1) Box 277Lincolnton	28092
Stephens, John A. (3) Box 2096Burlington	27215
Stephenson, G. W. (4) Box 588	20277
Stephenson, G. W. (1) DOX 500	20377
Stepp, Alfred P. (1) 15 Main St	28101
Stevens, Charles W. (1) Box 58	28630
Stewart, Joseph D. (2) 2008 Cloverdale AveWinston-Salem	
Stinson, John P. (2) 1023½ Beatties Ford RoadCharlotte	20200
Stinson, John F. (2) 1025 72 Beattles Ford Road	20200
Stoddard, Alan L. (5) Box 418	28532
Stokes, Thomas D., Jr. (3) 3410 Cloverdale DriveGreensboro	27408
Stone, David W., Jr. (2) 3411 Coldstream Lane	28205
	20200
Stone, Fleming H. (2)	
304 Cole Bldg., 211 Hawthorne Lane	28204
Stone, I. F. (2) Box 488Pilot Mountain	27041
Stonestreet, Frank M. (3) 255 N. Second St. Albemarle	28001
Storey, Frederick B. (2) 1530 Elizabeth AveCharlotte	20001
Stovall, O. R. (5) Box 901Goldsboro	27530
Stowe, G. C., Jr. (2)	
305 Randolph Medical Center, 1928 Randolph RoadCharlotte	28207
Strickland, William D. (3) UNC School of Dentistry. Chapel Hill	27514
Strickland, william D. (3) ONC School of DentistryChaper Him	27314
Stroud, Charles D. (1) Rt. 1 Ellenboro	28040
Stroup, Paul A., Jr. (2)	
621 Doctors Bldg., 1012 Kings Drive	28207
Strong C (9)	2020.
Strupe, James G. (2)	
Suite 762, 1900 S. Hawthorne Road	27103
Stubbs, J. M. (3) Box 807Rockingham	28379
Sturdevant, C. M. (3) UNC School of DentistryChapel Hill	27514
Styers Thomas P Ir (2)	- 1011
Styers, Thomas R., Jr. (3)	00000
Colonial Apts. 75-B, 3022 Chapel Hill Road	27707
Sugg, C. H. (3) Van Buren RoadLeaksville	27288
Sugg, Robert W. (3) 209 S. Gregson St	
Suggs, Joseph R. (3)	
Professional Bldg., 157 McArthur StAsheboro	27203
Suggs, Robert B. (1) Box 755Belmont	28012
Summey, Brett T. (1) West Jefferson	28694
Surles, Charles W., Jr. (3) 1124 E. Lexington AveHigh Point	27969

Sutphin, Hugh E. (3) 158 Renfro StMount Airy	27030
Swain, John P., Jr. (4) Professional BldgRaleigh	27601
Swindell, James E. (4) 1211 Cowper DriveRaleigh	27608
Swinderi, values 2. (1) 1221 compet 211 communications	_,,,,,
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Tally, William P. (4) Box 166Garner	27529
Tannenbaum, A. Raymond (3) 1001 N. Elm StGreensboro	27401
Taylor, C. B. (1) 6th & Fleming StsHendersonville	28739
Taylor, C. F. (2) 207 Hawthorne Lane	28204
Taylor, Clyde L. (3) 3200 Friendly Road	27408
Taylor, Gerald T. (2) 358 Forsyth Medical ParkWinston-Salem	27103
Taylor, Kenneth, Jr. (1) 111 W. Third Ave	28002
Taylor, Omer W. (1) 558 Fleming St	20203
Taylor, Preston R. (1) Box 108Belmont	28012
Taylor, Robert B. (4) 1677 Owen DriveFayetteville	28304
Taylor, Robert G., Jr. (2) Drawer 1071North Wilkesboro	28659
Teague, Charles H. (3) 716 Southeastern BldgGreensboro	27401
Teague, Everette R. (3) 641 Parkway BlvdReidsville	27320
Templeton, William B. (2)	
Suite 252, 1 Charlotte Town Center	28204
Teofan, Ronald O. (2)	
3569-C North Patterson Ave	27105
Tesh, Phillip G. (2) 715 Arbor St., N.E	28025
Tew, J. J. (4) Clayton	27520
Thomas, C. A. (5) Box 1315	20401
Thomas, Carl L. (2) Box 663	
Thomas, J. T., Jr. (3) Box 1014	27202
Thomas, Robert E. (3) Box 506	27203
Thompson, Harold W. (2) Box 156	28023
Thompson, Horace K. (5) 3500 Oleander DriveWilmington	
Thompson, James C. (3) Dental Detachment. Parris Island, S. C.	20401
Thompson, John L., Jr. (1) 416 W. Warren StShelby	29900
Thompson, Sanford W., III (4) 719 Professional BldgRaleigh	
Thorpe, J. O. (2) Suite 207 Randolph Medical Center,	27001
1928 Randolph Road	22207
Thurston, M. Stevenson (2) 316 S. Church St. Salisbury	
Todd, Walden R. (2) Box 487	
Tomlinson, F. N. (2) 310 O'Hanlon BldgWinston-Salem	
Towler, S. B. (4) 801 Professional Bldg	
Townsend, Gordon L. (4) Dunn	
Trail, Julian S. (3) Box 575	20120
Trammell, Jerry C., Jr. (3) 1601 Cornwallis Drive. Greensboro	27400
Trawick, David E. (1) Box 894	28017
Trivette, L. P. (2) Box 574	
Troutman, Dennis F. (2) 464 Eastway Drive	
Troutman, M. L. (2) Box 751 Kannapolis	
Trueblood, Samuel N. (5) Box 737	27889
Truluck, Moultrie H. (1) Suite B Medical-Dental BldgAsheville	28803
Tucker, W. W. (5) Room 108 Purser BldgGoldsboro	
Tulloch, Charles W. (4) Box 38Broadway	
Turbyfill, W. J. (1) Suite 1, 3 Doctors ParkAsheville	
Turlington, R. H. (4) Henry Vann Bldg	
Turner, Gerald P. (2) 110 G Stockton StStatesville	
Turner, James L. (3) 4519 High Point RoadGreensboro	27407
Turner, J. V. (5) Box 1426Wilson	27893
Turner, L. R. (5) Drawer "D"	28540
Turner, L. R. (5) Drawer "D"	28150
Turner, R. S. (3) 811 N. Elm StGreensboro	27401
Twisdale, Harold W. (2) 4421 Central AveCharlotte	28205

U	
Underwood, Alvin E. (3) Seawell BldgCarthage	22227
Underwood I T (3)	
3041 Lorraine Rd. N.W	24017
Underwood, Nash H. (4) 814 S. Main St. Wake Forest	27587
Underwood, R. L. (3) 3302 Starmount Drive Greenshore	27403
Upchurch, Gilbert R. (3) Drawer 1319Reidsville	27320
Upchurch, Jack B. (4) Box 636	27502
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V	
VanderVoort, C. Robert (3) U.S. 1 NorthAberdeen	28315
Van Vleet, David E. (3) 115 Arcade-Wellons Village Durham	27703
Vaughan, Thomas R., Jr. (5) 509 Avondale AveRocky Mount	27801
Vaughan, Thomas R., Jr. (5) 509 Avondale AveRocky Mount Vinson, Thomas W., Jr. (5) 106 Main StMurfreesboro	27855
Vollmer, T. D. (3) Suite J Medical Village.	
1610 Vaughn Road Burlington	27215
—w—	
Waddell M A (4) Scottish Penk Plds Fair Plats	90490
Waddell, M. A. (4) Scottish Bank BldgFair Bluff Wadsworth, Charles H. (2) 180 N. Union StConcord	28025
Waldron Pendleton G (3)	40043
Waldron, Pendleton G. (3) USAF Hospital, AACElmendorf AFB, Alaska	99506
Walker, Curley G. (1) 252 Charlotte St. Asheville	28801
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Walker, Joel W. (3) Box 549Graham	27253
Walker, M. E. (3) 1431 Broad StDurham	27705
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Wall, Joe T. (5) UNC School of Dentistry	27514
Wall, L. E. (2) 706 Independence Bldg	28202
Wallace, George M. (3) 307 Lindsay St	27260
Wallace, Mitchell W. (4) Spring Lake	20390
Walters Percy F (2) Roy 251  Monroe	20211
Waller, D. T. (2) 6021 Creola Road	28479
Ward, G. Thomas (1) 212 Great Meadows Court	23452
Ward, James A. (5) 228 Vance StRoanoke Rapids	27870
Ware, L. Dwight (2) 207 E. Main St	28697
Ware, William G., Jr. (2) 174 Forsyth Medical Park. Winston-Salem	27103
Warlick, R. Bruce (3) Box 331Southern Pines	28387
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Watson, Robert H. (2) 4200 Park Rd	27101
Waynick, I. M. (2) 731 Nissen Bldg. Winston-Salem	27101
Weant, Theodore F. (2) 529 Catawba Rd. Salisbury	28144
Weathershee Ramsey (5) 1806 Chestnut St. Wilmington	28401
Weathersbee, Ramsey, Jr. (5) 918 S. 17th StWilmington	28401
Weaver, R. C. (1) 19 Griffing Blvd	28804
Webber, Spurgeon W., Jr. (2) 2301 Keller Ave Charlotte	28208
webster, William P. (3) Rolling RdChapel Hill	27514
Weeks, H. E. (5) Tarboro	27886
Wehunt, Lloyd D. (1) Box 25. Valdese Wells, C. T. (1) Wells Bldg. Canton	20090
Wells, Carey T., Jr. (1) 100 Main St	28716
Wells, DeLeon, Jr. (5) Wallace	28466
Wentz, W. Robert (3) 1304 Broad St. Durham	27705
West, James B. (2) Box 1126	28659

Westrick, Charles M. (2) 164 Forsyth Medical Park. Win	ston-Salem	27103
Wharton, Richard G. (2) Box 422	Salisbury	28144
wheress, J. R. (3) 1123 S. Main St. Whicker, Thomas A. (2) 400 Randolph StT Whisnant, C. M. (1) Whisnant, James F. (1) Box 347.	Reidsville	27320
Whicker, Thomas A. (2) 400 Randolph St	homasville	27360
Whisnant, C. M. (1)	.Burnsville	28714
Whisnant, James F. (1) Box 347	Spindale	28160
White, Adolphus G. (5) 2820 Pelham Road Ro White, Kermit E. (5) Box 618 Eliz	cky Mount	27801
White, Robert D. (5) 900 Sunset Ave. Ro	abeth City	27909
White T L (2) Box 306 North	Willroghone	20650
White, Walter A. (5) 3108 Arendell St Mor	chard City	22557
Whitehead, J. W. (4) 508 N. Seventh St	ky Mount	27801
Whitehurst Poymend C. In (5) 510 Provided	.Smithfield	27577
Whitehurst, Raymond C., Jr. (5) 519 Broad St	oler Mount	27893
Whitson, Ronald W. (4) 511 S. Franklin St.	Whiteville	22472
Whittington, P. B., Jr. (3) 228 Medical Arts Bldg (	Greenshoro	27401
Wicker B K (4) Box 188	Marton	20264
Wilkie Bernard (2) 1950 F. White G.	ayetteville	28303
Wilkins H F Jr (2) 541 F Center St	Charlotte	28204
Wiggs, William J. (4) 2704 Fort Bragg Rd. F Wilkie, Bernard (2) 1850 E. Third St. Wilkins, H. F., Jr. (2) 541 E. Center St. Wilkins, Ralph A. (3) Box 1755.	Rurlington	27292
WILKIES W L. JE (3) IND/ ASPENDED SE	roonchoro	27/106
Wilkinson, Robert M (2) 214 Nissen Bldg Win	ston-Salam	27101
williams, Carolyn 1. (2) Box 36	Wilkeshoro	28659
Williams, D. Robert (3) 173 Hamilton Road	hapel Hill	27514
Williams, Egbert P. (2) 4200 Park Road Williams, Harry R. (4)	Charlotte	28209
Doctors Bldg., 912 Second St. N.E.	Hickory	28601
Williams, Japez H., Jr. (2) Box 866 T	homaevilla	27260
Williams, James Lowell (3) Box 188	Pittchoro	27212
Williams, Joel Sherrod (2) 120 S. Tradd St	Statesville	28677
Williams, Larry A (4) Box 296	ston-Salem	27101
Williams, Larry A. (4) Box 296	Goldshoro	27530
Williamson B W ir (3)	TTomalat	00045
Williamson, J. F. (3) Williamson, J. F. (3)	Greenville	27834
Williamson, J. F. (3)	Wadesboro	28170
Williford, William E. (2) 2032 N. Graham St	Charlotte	28206
Willis, W. Alex (5) Laran St	Durnam	27701
Wilson, Charles R. (2) Box 147	Marchaille	20102
Wilson, F. M. (2) 101 S. Havne St	Monroo	20110
Wilson, G. Curtis (5) 405 W. Nash St.	Wilson	27803
Wilson, J. J. (3) 709½ E. Washington Drive	High Point	27260
Wilson, Noah R., Jr. (3) Box 755. Wilson, Noracella McGuiro (1) 20 F. Main St.	Pittsboro	27312
Wilson, Noracella McGuire (1) 20 E. Main St. Wilson, Roy W. (2) 1101 Bolling Road.	Charlotte	28719
New Hope Professional Bldg., 224 New Hope Rd	Gastonia	28052
Windley Hoher W. (1) Box 628	Morganton	28655
Winstead, James L., Jr. (1) Box 2177	Zebulon	27597
Winter, Carlton V. (2) 1613 Montford Drive.	Charlotte	28739
Withers R W (2)	D- ! 1	00000
Wolfe, Carl B. (3) 1103 W. Friendly Ave.	reensboro	27401
Wolfe, Carl B. (3) 1103 W. Friendly Ave. C Woltz, William Lee, Jr. (4) Box 257	Sanford	27330
wood, Jerry F. (4) Medical Center	Salma	27576
Woodard W. L. (5)	Erwin	28339
Woodard, W. L. (5)	Beaufort	28516
woody, r. Spencer (3)	Porhoro	97579
WOODY, J. L. (1) Box 338	rycon City	99719
Woody, L. W., Jr. (1) Box 556	ruce Pine	28777

Woody, M. E., Jr. (1) 414 S. York St	Gastonia	28052
Woody, Sidney L. (1) 414 S. York St	Gastonia	28052
Woody, W. L. (1) 107 E. Third Ave	Gastonia	28052
Wooten, A. L. (5) 1116 W. Vance St	Wilson	27893
Wooten, Bobby G. (2)		
Suite 664, Forsyth Medical ParkWinsto	n-Salem	27103
Suite 664, Forsyth Medical ParkWinsto	now Hill	28580
Suite 664, Forsyth Medical ParkWinsto Wooten, George A. (5) Box 472S	now Hill reenville	28580 27834

#### --Y-

Yates, Robert A. (4) Box 265Chadbourn	28431
Yelton, John L. (1) Box 35Shelby	28150
Yelton, William D. (1) Box 2264Hickory	28601
Yelton, W. F. (2) 531 Nissen BldgWinston-Salem	27101
Yelverton, Hugh (5) 111 N. Rountree StWilson	27893
Yokeley, Gilbert W. (2) 412 O'Hanlon BldgWinston-Salem	27101
Yokeley, K. M. (2) 767 Oaklawn AveWinston-Salem	27104
Yost, William F. (2) Sharon Forest Shopping Center,	
6300 E. Independence Blvd	
Young, D. Clyde, Jr. (2) Medical Arts BldgSalisbury	28144
Young, Douglas M. (2) 834 Nissen BldgWinston-Salem	27101
Young, H. L. (5) 119 N. Church StRocky Mount	27801
Young, Pinkney B., III (5) 563 Evans StGreenville	27834
Young, T. L. (4) 920 W. Johnson StRaleigh	27605
Young, W. H. (5)Burgaw	28425
Young, W. Kenneth (3) 600 Pasteur DriveGreensboro	27403
•	

#### --Z-

Zaytoun, Henry S. (4) Suite 101, 1300 St. Mary's StRaleigh	
Zealy, James M. (5) 610 N. Jefferson St	
Zibelin, C. V. (5) Box 407Wallace	
Ziglar, James N., Jr. (2)Rural Hall	27045
Zimmerman, H. Stokes (2) 804 Nissen BldgWinston-Salem	
Zimmerman, John W., Jr. (2) 405 Wallace BldgSalisbury	
Zimmerman, L. H. (3) 164 S. Main StHigh Point	27260
Zimmerman, Thomas R. (3) 164 S. Main StHigh Point	27260
Zuccarella, James B. (2) 206 Lake Concord RoadConcord	28025

### RETIRED MEMBERS

Atwood, T. W. (3) 9 Carolee Apartments, Elder StDurham	27705
Derby, J. E. (1) Box 1279Tryon	28782
Hooper, Lyman J. (1) Apt. A-5, Longchamps AptsAsheville	28804
Nance, A. W. (4)Point Harbor	27964
Sturdevant, Roger E. (3) 3302 S. Elm StGreensboro	
Yates, P. P. (1) 107 S. Sharon RoadLenoir	28645

### NORTH CAROLINA DENTAL SOCIETY

### ROSTER OF MEMBERS

Arranged by towns and showing District in which each town is located.

(For mailing addresses, refer to alphabetical list.)

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Brown, J. B.
Ferro, Edward R.
Leary, Thomas E.
ALBEMARLE, 3rd District
Bowen, Carl Lee
Garber, M. R.

Garber, M. R.
Mauldin, Joel L.
Overcash, R. F.
Richardson, Maurice B.
Smith, Robert L.
Stonestreet, F. M.

ANDREWS, 1st District Ezzell, L. L.

APEX, 4th District Bryan, C. H. Jones, Marvin T., Jr. Pearson, Paul L. Upchurch, Jack B.

ASHEBORO, 3rd District
Atwater, John W., Jr.
Bulla, Thurman C.
Couch, Jon W.
Davis, Hal A., Jr.
Grimsley, W. R.
Kilpatrick, Ralph E.
McIntosh, James A.
Menius, John W.
Suggs, Joseph R.
Thomas, J. T., Jr.

Thomas, J. T., Jr.

ASHEVILLE, 1st District
Barker, O. C.
Becker, D. H.
Candler, C. Z.
Carpenter, M. W.
Carrell, George H.
Cave, William P.
Clark, Walter E.
Cunningham, F. S.
Daniel, Gary F.
Davis, Frank W.
Davis, Walter H.

Dudley, D. W. Elliott, Marvin L.

Gerdes, C. Don Girard, John W., Jr. Gregory, Lyman J., Jr. Hall, David K., Jr.
Hatchett, C. Mitchell, Jr.
Hoffman, Robert R.
Holmes, Robert W.
Hooper, Lyman J. (Retired)
Hoyle, Frank W.
Lones, Charles F. Jones, Charles E. Jones, Charles E.
Keener, Harold
Kennerly, Robert B.
Lemler, John F.
McCracken, Clayton H.
McFall, Walter T.
Maddox, James H.
Martin, Franklin E.
May, H. M.
Morris, Thomas A.
Mundy, Carl R.
Mynatt, William A.
Osborn, Carl F.
Owen. Robert H., Jr. Owen, Robert H., Jr. Patterson, George K. Pennell, William T. Pless, C. A. Pless, Cecil A., Jr. Ray, Kenneth M. Reeves, James D.
Rich, C. Frank
Riddle, A. C., Jr.
Roberson, Joe B.
Roberts, Pearce, Jr.
Rogers, E. Kent, III Shapiro, Eugene N.
Sherrill, Claude A., Jr.
Truluck, Moultrie H.
Turbyfill, W. J.
Walker, Curley G.
Weaver, R. C. AYDEN, 5th District Brown, Oscar Hubert Gooding, Herbert W. BANNER ELK, 1st District Perdue, Phillip S. Stamper, Clifford M.
BEAUFORT, 5th District
Rudder, William L.
Woodard, W. L.

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Woody, J. L.

BURGAW, 5th District
Young, W. H.

BURLINGTON, 3rd District Brannock, R. W. Caddell, F. S. Easley, Ernest E. Foushee, L. M.
Frost, J. S.
Garrison, N. W.
Gilliam, F. E.
Hinson, Thomas R.
McFarland, Wilbur G., Jr.
McKenzie, Owen Ray Moore, Saunders W. Moser, Galen C.

Murray, Henry V. Newman, J. U., III

Roberts, J. Ernest

Stephens, John A. Vollmer, T. D. Wilkins, Ralph A.

Scott, Ludwig G. Slott, E. F.

Patterson, George G. Perdue, H. L.

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Barker, Bennie D.
Barton, Roger E. Bawden, James W. Buckland, Michael B. Burns, E. R. Burns, William T. Cathey, Gerald M. Chapin, M. E. Clark, Dwight L. Clark, Dwight L.
Courtney, Richard M.
Crandell, C. E.
Darden, T. H.
Davis, William G.
Demeritt, W. W.
Dobson, David P.
Drake, Claude W.
Evans, Marvin R.
Gray, Gus W.
Helmers, Gordon B. Helmers, Gordon B. Holland, Murry W. Hunter, Grover C. Kramer, Donald R. Laton, Joseph F. Lindahl, Roy L. Lupton, Cecil R. McFall, Walter T., Jr. Marks, Sandy C. Miketa, Andrew J. Mitchell, David L. Mitchell, Patricia S. Murray, Henry V., Jr. Nelson, R. M. Newton, Maurice E.

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CHARLOTTE, 2nd District Albright, L. B. Alford, Frank O. Allen, Thomas I. Archer, John M., III Austin, Edward U. Aycock, Charles B.
Ballard, David L.
Banker, L. L., Jr.
Barringer, Martin D. Baucom, Jimmie P. Baucom, Thomas A. Bean, William C. Benfield, Robert H. Biddix, Clarence F. Bishop, E. L. Black, A. R. Bottoms, Alton B. Breland, A. Breece Brown, James A. Bumgardner, A. S.
Bumgardner, L. F.
Burroughs, Robert C., Jr.
Campbell, Ralph B.
Compton, Dudley D.
Cock Adolphus J. Cook, Adolphus J.
Cooley, Julius R.
Couch, C. Dean, Jr.
Craig, Joe B. Crumpler, Lyle E. Culbreth, F. H. Culp, Donald D. Diggs, Robert M. Dixon, John H. Dunn, John R. Elliott, James J. Evans, Donald C. Fox, Burke W. Franklin, A. J. Freedland, J. B.
Funderburk, Ervin M.
Galarde, A. J.
Goodman, Alvin S.
Graham, Frank R. Graham, James E., Jr. Guion, J. Homer

Hamer, Thomas N. Harrelson, Henry C., Jr. Harris, Edward F Hawkins, Reginald A. Haynes, Frank K. Heeseman, Gary, Jr. Heinz, J. W. Hill, Brian P. Hoffman, Milo J. Hoover, Dan C. Hoover, R. G. Houser, James B., III Hull, P. C., Jr. Hull, Robert H Irwin, John R. Jarrell, William A., Jr. Jarrett, Charles A. Jarrett, Charles A.
Johnson, James B.
Johnson, Ronald L.
Johnston, Charles M.
Jordan, John J.
Keiger, Cyrus C.
Kendall, James E.
Kendrick, Vaiden B.
Kirkendol, E. C.
Kiser, J. Donald Kiser, J. Donald Lentz, B. P. Libby, Robert H. MacKay, Noel C. Mack, Thomas A. Marbry, Donald L. Miller, Barry G. Mitchum, Kenneth E. Moore, E. D. Morris, Donald W. Morris, Ernest Moses, John E. Motley, Elliot R. Murphy, Martin H. Nash, George T. Nisbet, Thomas G. Owen, Kenneth D. Owen, Olin W. Patterson, Henry B. Pearson, Charles H. Peeler, L. B. Peery, W. Stewart Perlin, Mark N. Petersen, S. D., Jr. Petree, R. E. Pharr, John R. Poole, Robert H., Jr. Porter, W. Joseph Reeves, Horace P., Jr. Rehm, Jerome G. Reynolds, John A. S. Rider, Ernest A. Robinson, Charles F. Rogers, John T. Ross, Grady Ross, Heywood Schmucker, Ralph Sherrill, Luby T., Jr. Short, L. H. Simendinger, William H., Jr.

Smith, James R. Snyder, Harry G. Springer, Dennis H. Stinson, John P. Stone, David W., Jr Stone, Fleming H. Storey, Frederick B.
Stowe, G. C., Jr.
Stroup, Paul A., Jr.
Taylor, C. F.
Taylor, Lois E. Templeton, William B. Thorpe, J. O. Troutman, Dennis F. Twisdale, Harold W. Wall, Lester E. Waller, D. T. Watson, Robert H. Webber, Spurgeon W., Jr. Wilkie, Bernard Williams, Egbert P.
Williford, William E.
Winter, Carlton V.
Yost, William F. CHERRYVILLE, 1st District McKee, Raymond A. Smith, Ray Hoyle CHINA GROVE, 2nd District Thompson, Harold W. CLAYTON, 4th District Payne, J. M. Tew, J. J. CLEMMONS, 2nd District Nifong, Paul D. CLIFFSIDE, 1st District Hunt, John J. CLINTON, 4th District Bell, Morris L. Herring, W. I.
Jackson, Wilbert
Merritt, William E. Powell, J. B. Turlington, R. H. CLYDE, 1st District Miller, George I. COLUMBUS, 1st District Oliver, John N. CONCORD, 2nd District Carlough, Robert Davis, Joe V., Jr. Ezzell, J. W. Furr, Curtis E. Harrell, Daniel B.
Jones, B. E., Jr.
Patterson, R. M.
Reece, J. P.
Sapp, Hubert B.
Tesh, Phillip G.
Wadsworth, Charles H.
Zuccarella, James B. CONOVER, 1st District Canrobert, C. W., Jr. Sowers, Jerry W. CONWAY, 5th District Clark, George E.

CROSSNORE, 1st District Sloop, W. M. DALLAS, 1st District Mayberry, Roland L. **DAVIDSON**, 2nd District Withers, R. M. DENTON, 2nd District Hawkins, Ralph O., Jr. DOBSON, 2nd District Folger, J. M. DREXEL, 1st District Fair, Ronald E. Shelton, Vader, Jr. DUNN, 4th District Hooper, G. L. Jernigan, J. A. Jernigan, Jerry O'Dell Roberts, C. E. Townsend, Gordon L. DURHAM, 3rd District Abbey, Wallace D., Jr. Adams, C. A., Jr.
Adams, C. A., III
Atwood, T. W. (Retired)
Bell, John T. Bowling, Howard X. Byerly, Charles T., Jr. Caldwell, Clell S. Campbell, Joseph E. Carr, Daniel T. Carr, Henry C. Cherry, M. L. Citrini, Richard J. Clark, C. F., Jr. Dilday, John S. Dixon, T. L. Dorton, John Dorton, John
Draughon, Donald R.
Draughon, Wallace R.
Georgiade, N. G.
Getsinger, Duncan M.
Griffin, W. Kimball
Harris, Guy V.
Heath, LeRoy K.
Howell, W. C., Jr.
Kanoy, B. Edmond
Kirkland, George F. Kirkland, George F., Jr. Lazenby, Glenn A., Jr. Leggette, James A., Jr. Little, T. A. Mainwaring, John W., Jr. Matney, John L. Monk, Henry L., Jr. Pierce, T. Carlton Pierce, T. Carlton Quinn, Galen W. Ramos, Frank M. Ross, Norman F. Ross, Thurman J. Sapp, Baxter B., Jr. Stallings, June H., Jr. Stallings, Riley S., Jr. Styers, Thomas R., Jr. Sugg, R. W. Van Vleet, David E. Walker, M. E. Walker, M. E.

Wentz, W. Robert Willis, Guy R.

EAST BEND, 2nd District Garriott, Rosebud Morse

EDENTON, 5th District Griffin, Wallace S. Hart, W. I. Hines, Richard N., Jr. Horton, Johnnie H.

ELIZABETH CITY, 5th District

Fields, Wade T. Gollobin, Arthur Griffin, Lloyd E. Haynes, John E. Jones, Clifford B. Jones, Clifford B., Jr. Nixon, H. E. Riggs, A. F. Spence, W. M. White, Kermit E.

ELIZABETHTOWN, 4th District Jessup, Percy W., Jr. Johnson, Clemuel M.

Keith, William C. ELKIN, 2nd District Duncan, Allie H. Harrell, James A. Harrell, R. B. Hartness, William R., III Parks, Eldon H. Pruett, L. Doyle Schiebel, E. C.

ELLENBORO, 1st District Stroud, Charles D.

ENKA, 1st District Qualls, Dixon L. ERWIN, 4th District Woodall, D. C.

FAIR BLUFF, 4th District Waddell, M. A. FAIRMONT, 4th District

Floyd, Daniel J. Purvis, P. C. FALLSTON, 1st District

Lutz, Gerald W. FARMVILLE, 5th District Horton, Thomas J. Jones, Paul E. Mercer, William C., Jr.

Warren, Bert B. FAYETTEVILLE, 4th District Beck, Charles H.

Brooks, Robert E. Butler, George L., Jr. Caviness, W. Robert Ehrlich, Karl F. Gainey, Robert H. Goodwin, C. J. Grimes, William F. Hair, John S. Hale, J. P. Hancock, James B. Hasty, Frederick G. Holzbach, Richard L. Lee, Douglas D.

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Sappington, R. R., Jr.
Smith, Newton
Smith, Thomas K. Taylor, Robert B. Wiggs, William J.

FLETCHER, 1st District Port, Forest C.

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FRANKLIN, 1st District Furr, Walter E. Grant, Ben P. Henson, David E. Lawrence, Eugene W., Jr.

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FUQUAY SPRINGS, 4th District Adcock, George W., Jr. Edwards, J. R., Jr. Maus, Paul

GARNER, 4th District Woodard, Warden Lewis, Jr. Raynor, Bobby C. Tally, William P.

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Taylor, Kenneth, Jr.
Walker, Woodrow W.
Wilson, William D.
Woody, M. E., Jr.
Woody, Sidney L.
Woody, W. L. GOLDSBORO, 5th District Boykin, Thomas C. Cofield, H. F. Cox, James L. Delbridge, Matthew G. Ennis, Myron H.
Heeden, William M., Jr.
Hinnant, R. Willard
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Howell, James B.
Hunsucker, Hugh
Hunter, M. Ray
Irvin, John L.
Kareek, Harry, A. Karesh, Harry A.

Kriegsman, Robert M.

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Pearce, O. R., Jr. Ross, Ledyard E. Williamson, James M. Wright, Dan

Wright, Dan Young, Pinkney B., III

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GROVER, 1st District Ellis, Benjamin T.

GUILFORD COLLEGE, 3rd District Lineberry, Donald E.

HAMLET, 3rd District Adams, Roy G. Williamson, B. W., Jr.

HAVELOCK, 5th District Gooding, Carnie C. Stoddard, Alan L.

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Taylor, C. B.
Taylor, Omer W. Winstead, James L., Jr. HENRIETTA, 1st District Hamrick, T. Hicks, Jr. HERTFORD, 5th District Bonner, Allan B. HICKORY, 1st District Abernethy, G. Shuford Abernethy, David Ashworth, Derwood L. Barnhill, James H. Bost, John Dewey Brady, C. A., Jr. Brown, C. Fred Davenport, H. V. Fritz, C. B. Fritz, John R. Frye, David G., Jr. McDowell, William W. Poovey, Auburn L. Poovey, John N. Price, James L., Jr. Williams, H. T. Yelton, W. D. HIGHLANDS, 1st District Moreland, Jessie Z. HIGH POINT, 3rd District Anderson, G. N. Andrews, John L., Jr. Bass, Robert E. Bencini, E. A. Campbell, John K. Campbell, William R. Cashion, Leonard R. Dawson, I. C. Garrett, Thomas B. Gibson, Sam B. Hart, Samuel T. Hester, Elliott M. Hinson, William P., Jr. Horton, C. W.

Jarvis, William C.
Johnson, Numa C., Jr.
Kiser, Winford J.
Little, Perry P.
McKaughan, W. R.
Megginson, L. P., Jr. Morgan, James C. Samuel, Michael D. Surles, C. W., Jr. Wallace, George M. Wilson, J. J. Zimmerman, L. H. Zimmerman, T. R. HILDEBRAN, 1st District Lyerly, Alan R. HILLSBOROUGH, 3rd District HILLSBOROUGH, 3rd District
Carroll, Larry W.
Moore, H. W.
HUDSON, 1st District
Hefner, Allen R.
HUNTERSVILLE, 2nd District
Jurney, Henry C.
JACKSON, 5th District
Grant, L. C., Jr.
JACKSONVILLE, 5th District
Anderson Wayne C Anderson, Wayne C. Browning, Henry D., III Demary, C. J. Gaskins, R. Hogan, Jr. Johnson, C. B. Jones, William R. Ketcham, William S. Morgan, W. Kenneth Reid, Thomas B., Jr. Turner, L. R.
Willis, W. Alex
JAMESTOWN, 3rd District Herndon, Claude H.
JONESVILLE, 2nd District Miller, Fred C., Jr. KANNAPOLIS, 2nd District Lipe, E. W. Moon, Hewitt E. Morgan, E. B. Morgan, E. B., Jr. Parks, J. H. Ridenhour, C. E.
Slaughter, Freeman C.
Troutman, M. L.
KERNERSVILLE, 2nd District
Dalton, Robert B.
Griffin, Donald C.
Pagg, Fred N Pegg, Fred N. Southard, F. J. KING, 2nd District Booe, I. A. Fowler, William F. Helsabeck, W. J. KINGS MOUNTAIN, 1st District Baker, Robert N. Baker, Thomas P. Hord, D. F. Lewis, O. P.
KINSTON, 5th District
Beasley, Britton F.
Dupree, Louis J., Jr.

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Turner, J. V.
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Wilson, G. Curtis
Wooten, A. L.
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# Group Insurance Plans Sponsored by The North Carolina Dental Society

### Prepared by the Office of the Executive Secretary

The 1967 House of Delegates adopted the following resolution: "Resolved, that the Insurance Committee be asked to draw up a brief compilation of group insurance plans available to members of the North Carolina Dental Society and that this information be distributed by the Central Office to each member of the Society." This summary was prepared by the office of the Executive Secretary at the request of the Insurance Committee. Members of the 1967-68 Insurance Committee are: J. S. D. Nelson, Raleigh, chairman; T. L. Blair, Winston-Salem; John S. Dilday, Durham; W. A. Mynatt, Asheville; and Donald L. Henson. Kinston.

The North Carolina Dental Society sponsors five group insurance plans for its members:

Disability

Major Medical

Accidental Death and Dismemberment

Hospital Income

Life

In the Fall of 1967 a group retirement program was made available to society members.

All these programs have been developed and are supervised by the Insurance Committee as a benefit of membership.

As a means of informing the members on the insurance protection offered on a group basis at a rate substantially less than that for which similar coverage could be purchased on an individual basis, a brief description of the Society sponsored programs follows.

New members should note that they may enroll in the disability, major medical, and hospital income programs without presenting evidence of insurability, provided they join the Society at the earliest date available to them, and that they apply for coverage within 60 days after election to membership. The enrollment period for new members in the life insurance program is 90 days.

Full information on any of these plans may be obtained from the insurance agencies or from the Central Office.

### Retirement Program

A Group Retirement Program became available to Society members in the Fall of 1967. It is administered by Financial Service Corporation of America, an Atlanta based firm with branch offices throughout North Carolina. A North Carolina bank serves as trustee of the retirement fund.

The program is extremely flexible and allows the member the greatest possible latitude in creating a retirement plan best suited to his needs, either under the provisions of the Keogh Act or not.

The Fidelity Group of Mutual Funds is the primary investment medium of the plan, and Continental American Life Insurance Company is the primary insurance carrier.

### **Disability Insurance**

Since 1943, J. L. Crumpton of Durham has administered a Disability Insurance Program designed to meet the present day needs of the dentist. It is underwritten by the Commercial Insurance Company of Newark, N. J., a member of the Continental Insurance Companies of New York. The purpose of this program is to provide financial security in the event of disability because of sickness or injury which prevents an insured member from earning income from practice of his profession.

This policy will pay up to \$1,080 a month. For disability because of injury, benefits may continue for lifetime. For disability because of sickness the benefit will be paid up to a possible 7 years for each sickness, or, for a slightly higher premium, the benefit period may be extended to age 65. No confinement

is required for either accident or sickness disability.

Optional benefits include up to \$30 for each day of hospitalization from the first day up to 90 days for a member, and up to 70 days for dependents, and a maximum \$225 benefit for surgery.

Any member under age 60 is eligible to apply.

New members will be accepted regardless of their physical condition or past medical history, provided they apply within 60 days after beginning active practice and election to active membership.

Upon attaining the age of 70, a policy holder will be issued a completely new policy which he may carry as long as he is in active practice, provided he makes application within 60 days prior to the expiration of his current policy.

### **Major Medical Insurance**

The Group Major Medical Insurance Program, underwritten by Insurance Company of North America, covers virtually all areas of medical expenses incurred in and out of the hospital for members, their employees, and their families. It is administered by the Moore and Johnson Company of Raleigh in all Districts except the First. The R. Stanford Webb Agency of Asheville administers the program in the First District.

This policy is designed to protect the insured against catastrophic medical experience, as distinguished from the normal experience covered by basic hospital and surgical expense offered by Blue Cross-Blue Shield agencies or commercial companies.

The program will pay 80 per cent

of all eligible expenses in excess of the selected deductible amount up to a maximum of \$10,000. Eligible expenses include hospital room and board up to \$25 per day; surgeon's fees up to \$1,000 for each surgical procedure; physicians and anesthesiologists; private nurses; dental treatment to natural teeth to the extent necessitated by injury; and other medical supplies and services.

Members and their employees under age 59 are eligible to apply. Families of members may be covered, including the applicant's wife, and children over 14 days and under age 23 who are dependent on the applicant for support and maintenance.

A new member will be insured regardless of past medical history provided he has joined the Society at the earliest date available to him after entering private practice and applies for coverage within 60 days after becoming a member.

Previously insured members returning to civilian practice from the armed services will be accepted without restriction, if they apply within 90 days of their discharge from the military.

When a member reaches age 70, he can continue his coverage for life at reduced benefits and no increase in premium. The policy will then pay 60 per cent of all eligible expenses up to a maximum of \$5,000 for each accident or sickness.

In the event of the member's death, insurance for surviving eligible dependents may remain in force.

Coverage of employees of members terminates at age 70 or when

they retire or cease to be employed by the member, whichever occurs earliest.

### Accidental Death and Dismemberment

An Accidental Death and Dismemberment Plan, underwritten by Insurance Company of North America and administered by the Moore and Johnson Company of Raleigh has a legitimate place in a dentist's insurance portfolio.

A member may select any amount of death benefit (principal sum) up to \$100,000 at the group-based rate of \$1.00 per year per \$1,000 per year.

Members under 70 are eligible for this protection regardless of health history.

The plan will pay the full principal sum for accidental death or for loss of two or more members (hand, foot, or eye). One-half the principal sum will be paid for loss of one member, and one-quarter the principal sum will be paid for loss of thumb and index finger of the same hand.

Under this plan the insured is covered whether the accident occurs in the office, at home, or travelling by land, sea, or air. For the dentist who travels a great deal, it is an inexpensive form of travel insurance.

### **Hospital Income**

Members and their employees up to age 60 who are engaged full-time in their duties are eligible to apply for coverage for themselves and their families in a Hospital Income Plan. It is underwritten by Commercial Insurance Company of Newark, N. J., a member of the

Continental Insurance Companies of New York, and administered by J. L. Crumpton of Durham.

The plan pays a flat \$10, \$20, or \$30 directly to the insured for each day up to 365 days for each sickness or accident while the insured is hospitalized and under the care of a physician. It is excellent for the younger practitioner who has, or may expect to have, several dependents and who desires to supplement the payments which he would receive under any other insurance he may have. It is also valuable for the older practitioner who may reasonably expect to experience an increased need for medical services.

#### Life Insurance

A Life Insurance Program underwritten by Northwestern National Life Insurance Company and administered by J. Slade Crumpton of Durham offers the member a choice of \$10,000 or \$20,000 low cost life insurance protection. After he has enrolled for basic insurance under the Program, he may apply for additional insurance up to a maximum of \$50,000, provided he is under 50 years of age and submits satisfactory evidence of insurability.

Members under 70 are eligible for this Program subject to satisfactory evidence of insurability. New members may enroll within 90 days without medical examination.

A new member who joins the Society prior to entering military service is eligible for the life insurance program without restrictions.

Wives of members may be insured for \$2,500 and each unmarried child may be insured for \$1,000.

At any time the policy may be converted to any participating life or endowment policy issued by the company.

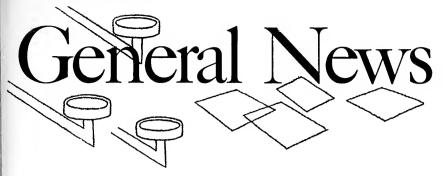
### Supplemental Group Coverage

Society members may also participate in two group insurance plans sponsored by the American Dental Association to supplement their coverage under plans sponsored by the North Carolina Dental Society, including:

- (1) A Life Insurance Program underwritten by the Great-West Assurance Company of Winnepeg, Canada. Members under age 60 are eligible to apply.
- (2) An Accident and Sickness Insurance Program underwritten by the Insurance Company of North America, and administered by M. A. Gesner, Inc., of Chicago. Members under age 70 who are actively engaged in the practice of dentistry are eligible.

A group retirement program, qualified under the Keogh Act and sponsored by the American Dental Association became available to members of the Society January 1, 1968. It features fixed and variable annuities and is underwritten and administered by the Equitable Life Assurance Company of the United States.

For more information on these programs, write the American Dental Association or the North Carolina Dental Society.



### Credit Card Plans

In its report to the 1967 House of Delegates, the Judicial Council of the American Dental Association issued the following statement on the participation of dentists in bank credit card plans:

"A number of banks have started extensive programs for the use of bank credit cards. These cards differ from the conventional department store, gasoline company and similar credit cards in that the single bank card is

ostensibly acceptable through all sectors of the economy.

"Dentists have been invited to participate in these plans by accepting bank credit cards as a means for payment for professional services. There is some degree of similarity between the use of the credit card and the post-payment plans offered by many banks, but the credit card does present some new questions of the application of the *Principles of Ethics*.

"The Judicial Council offers the following guidelines as interpretations of the *Principles of Ethics* in their application to the acceptance of credit

cards for the rendering of dental services.

1. The listing by a credit card company of the dentists who will accept the credit card places the participating dentists in violation of Section 12 of the *Principles of Ethics*.

- 2. A dentist who displays outside his office an emblem or other sign that he will accept credit cards is acting in violation of Section 2 of the *Principles* because in the view of the Judicial Council such conduct tends to lower the public esteem for the profession. Plaques indicating participation within the dentist's office shall be kept to a discreet and dignified minimum.
- 3. Participation in the credit card program does not constitute tendering rebates or splitting fees, as those terms are used in the *Principles of Ethics*.
- 4. The dentist should not encourage his patients to participate in the credit card program.
- 5. The individual dentist should not because of his participation increase his fee for dental services.

"In practice, the Judicial Council believes that the *Principles of Ethics* would not prohibit a dentist from accepting a credit card. However, the Judicial Council believes that it is incumbent upon all dentists who accept credit cards to avoid any related conduct which would place them in violation of the *Principles of Ethics*."

### House Approves Auxiliary Proposal

The A.D.A. House of Delegates at its meeting in Washington, D. C. in November adopted a resolution asking state dental societies and examining boards to consider recommending revisions of dental practice acts to achieve more effective use of dental hygienists and assistants by practitioners. The full text of the resolution follows:

"Resolved, that constituent dental societies and state dental examining boards consider recommending revision of dental practice acts (1) to give their examining boards authority to prescribe rules or regulations to achieve more effective utilization of the services of dental hygienists and dental assistants and (2) to eliminate from their acts the serial listing of functions performed by the dental hygienist, and be it further

"Resolved, that state dental examining boards consider the educational standards established by the American Dental Association in determining the qualifications of dental hygienists and dental assistants to perform functions prescribed within rules or regulations of the board."

The resolution approved was a substitute for resolution 22 proposed in a joint report of the Councils on Dental Education, Dental Health, and Legislation.

The House recommitted to the Council on Dental Education resolution 4 which called for reexamination of several aspects of state dental practice acts.

The House also considered a resolution by the Board of Trustees that the annual dues be increased

from \$40 to \$60 effective January 1, 1969. The resolution will be submitted to the 1968 House of Delegates for action.

In other actions the House: adopted a record \$7 million budget with an \$81,285 deficit; expressed concern over apparent threats to the continued operation of some existing dental schools because of financial difficulties; approved a statement opposing in principle. closed panels; adopted a resolution making the ADA Judicial Council the last court of appeal "in all disciplinary procedures"; and adopted two amendments to the ADA Dental Health Program for Children, but rejected a third.

Dr. F. Darl Ostrander of Ann Arbor, Michigan was installed aspresident of the American Dental Association. Other officers elected and installed were: Dr. Hubert A. McGuirl, Providence, R. I., president-elect; Dr. Harvey S. Huxtable, Mineral Point, Wisc., first vice president; Dr. Charles F. Bartels, New Orleans, second vice president; and Dr. Francis J. Fabrizio, Washington, D. C., third vice president.

### Dentists May Now Be Summoned for Jury Duty

Dentists will automatically be included on county prospective jury, duty lists under provisions of statutory amendments made by the 1967, General Assembly.

The General Assembly deleted the exemption for more than 30 different categories, declaring . . . "that jury service is the solemn obligation of all qualified citizens, and that excuses . . . be granted only for reasons of compelling personal

hardship or because requiring service would be contrary to the public welfare, health, or safety."

Upon being summoned for jury duty, a dentist in order to be excused, must appear before the chief district judge (or judge designated by him) at the time and place designated at which excuses will be heard.

The law provides that the District Judge is the sole authority for granting exemptions from jury duty.

### Scrap Amalgam Drive

An office-to-office collection of scrap amalgam will be conducted by the Dental Auxiliary during the week of February 19-24. Mrs. Joel S. Williams of Statesville heads the drive this year.

Since 1953 the Auxiliary has contributed over \$40,000 to the Society's Relief Fund through its annual Scrap Amalgam Drives in cooperation with the dental supply houses in the State.

In announcing plans for the 1968 drive, Mrs. Williams said, "Please save your scrap amalgam and give it to the Auxiliary drive scheduled this year for the week of February 19-26. All of it will go for the benefit of dentistry in North Carolina. No other way that I know of can you dispose of your scrap amalgam and receive the total benefit."

### ADA President-Elect to Speak

Dr. Hubert A. McGuirl of Providence, R. I., president-elect of the American Dental Association has accepted an invitation to speak at the opening meeting of the 112th Annual Session of the Society in Pinehurst, May 5-8, 1968.

The four-day meeting will feature three nationally known lecturers.

Dr. Rex Ingraham of the University School of Dentistry will speak on "Aspects of Restorative Dentistry." Dr. Francis T. Scott of Jacksonville, Florida will lecture on "Periodontia as Related to Restorative Dentistry." Dr. John Ott, director, Environmental Health and Light Research Institute, Sarasota, Florida will present an informative and fascinating program on "The Influence of Light on Living Things" which will be of interest to layman and professional alike. Dentists are urged to invite their wives to hear Dr. Ott.

### Uniform Fee Schedule

A uniform fee schedule for dental services rendered under programs administered by the School Health Program, the Department of Public Welfare, the Commission for the Blind, and the Division of Vocational Rehabilitation became effective October 1, 1967. It was developed by the State agencies involved and the Department of Administration in cooperation with the Society's Dental Care Programs Committee.

A uniform reimbursement voucher has also been designed for use in all these programs.

Dentists are now requested to bill State agencies on a usual and customary fee basis. However, they will be paid according to the uniform fee schedule. This will provide experience and data for the State to determine budgetary requests submitted to the 1969 General Assembly sufficient to finance these programs on a usual and cus-

tomary fee basis rather than on a fixed fee schedule.

Dentists are reminded that the scope of the programs has not been changed. All the procedures listed on the fee schedule are not included in each of the programs.

## NCPHA Recommends Statewide Fluoridation

North Carolina Public The Health Association at a meeting October 6, 1967 went on record "as supporting appropriate legislation empowering policy-making boards of the State Board of Health and local boards of health to require the adjustment of the fluoride content of public and institutional water supplies as necessary to assure a supply of wholesome water which will reduce the incidence of dental caries."

Figures recently released by the State Board of Health show that of the 2,390,000 people in North Carolina served by a municipal or sanitary district water supply, 73.4 per cent drink water with natural or adjusted fluoride content.

### TV Career Programs

A series of six 30-minute programs on careers are being produced by the North Carolina Association of Professions for showing on the WUNC educational TV stations during the Spring of 1968.

Each program is designed to focus the attention of high school students on careers in the following professions: architecture, dentistry, pharmacy, medicine, professional engineering, and veterinary medi-

Richard F. Snavely, program director, N. C. State University TV is directing the series titled "You and Your Future."

Moderator of each program is Robert G. Bourne of Raleigh, president, N. C. Association of Professions.

Dr. W. D. Strickland of Chapel Hill is chairman of the committee which is preparing the film on dentistry. Assisting him are: Drs. R. L. Earp, Raleigh; R. E. Barton, Chapel Hill; B. R. Baker, Chapel Hill; Robert Wentz, Durham; and L. P. Megginson, Jr., High Point.

### Hinman Clinic

Special closed circuit television programs — live and in color — will highlight the 56th annual Thomas P. Hinman Dental Meeting at the Atlanta Marriott Motor Hotel in Atlanta March 24-27, 1968.

One of the largest dental meetings in the world, the Hinman Meeting is expected to attract more than 6,000 dentists and dental assistants. Theme for the 1968 meeting is "Emphasis: General Practitioner."

Three separate televised programs showing actual operative procedure will feature: Dr. Clifford Ochsenbein of Dallas, Texas, performing periodontal surgery; Dr. Clyde Schuyler, Montclair, N. J., occlusion; Dr. H. James Harpole and Dr. Robert A. Kutz, both of Atlanta, immediate dentures from impression to insertion.

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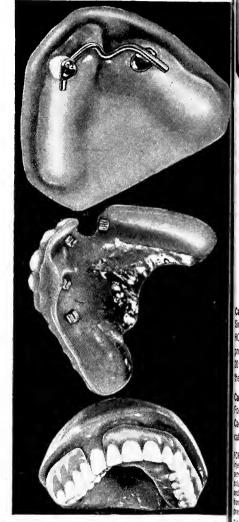
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References: 1. Hiatt, W. Local anesthesia; history; potential toxicity; clinical investigation of mepivacaine. Dent. Clin. North America p. 243 July 1961. 2. Ross, N.M. and Dobbs, E.C. Mepivacaine HCI (Carbocaine). J. Oral Surg. Anes. & Hosp. D. Serv. 21:215, May 1963.

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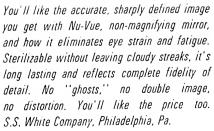
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the meat group...when some eggs and glanr meats are chosen...\3 the protein and iron \2 the niacin...and \4 the thiamine, ribon and vitamin A...

ivegetables and fruits ... all the vitamin C ... 'he vitamin A value ... 1/4 the iron ... and he thiamine ...

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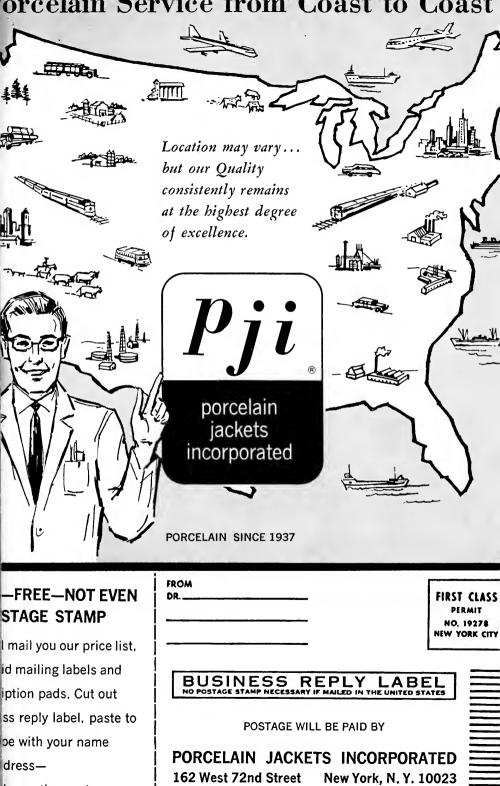
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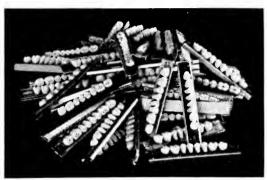
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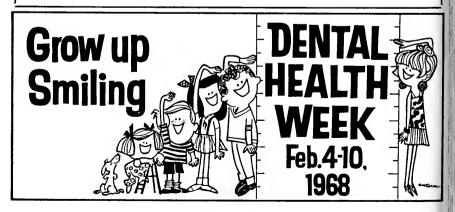
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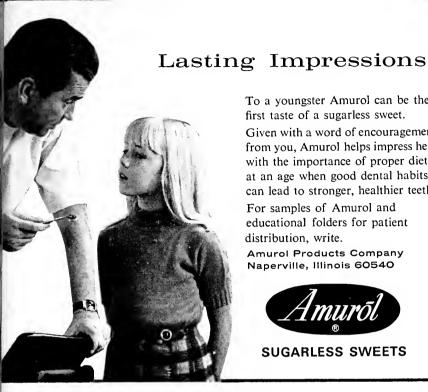
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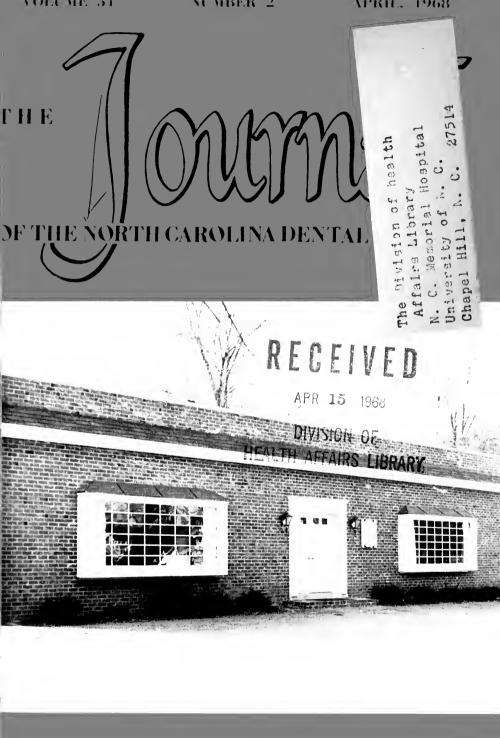
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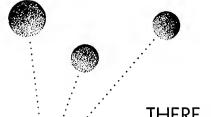
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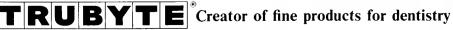
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#### THE JOURNAL

of

#### The North Carolina Dental Society

(A Constituent of the American Dental Association)

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of the interior.

in Raleigh. See pages 18 and 19 for a picture story

Fifth District

Kinston

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#### In grateful appreciation this issue is



dedicated to . . .

J. B. Freedland, DDS, FICD Charlotte, N. C.

In 1938 a young Wilmington native, having attended the University of North Carolina and Atlanta Southern Dental College, came to Charlotte to begin the practice of general dentistry. Having honored his community, his profession, and most of those whom he served as a general practitioner. Jack Freedland in 1964 became the first private practitioner in North Carolina to limit his practice to Endodontics.

Dr. Freedland, whose influence in dentistry is truly international in scope is a past president of the Charlotte Dental Society, the Second District Dental Society, and the American Association of Endodontics. Having been instrumental in establishing Endodontics as one of the American Dental Association approved dental specialties, he is presently a member of the American Board of Endodontics. He is a clinical professor at the University of North Carolina School of Dentistry and a consultant to the Dental Departments of the Army and Navy. Dr. Freedland has lectured extensively in this country and abroad, has contributed numerous articles to the dental literature and is an editor of the Journal of Oral Surgery, Oral Medicine and Oral Pathology.

Jack Freedland, in stimulating his fellow dentists to expand their knowledge and competence through participation in study clubs and attendance at qualitative meetings, has made one of his greatest contributions.

Diligence and devotion has marked Dr. Freedland's service as a civic and religious worker. His excellence of personal achievement is matched only by his desire to elevate and advance the practice of dentistry. However, his uncompromising and unselfish dedication to the profession and principles for which he stands indeed makes him a man among men.



# The President's Page

I want to welcome all the members of the North Carolina Dental Society to our 112th annual convention to be held in Pinehurst, May 5-8. This year we return to the Sunday through Wednesday routine and our program is packed from the champagne lawn party sponsored by the Dental Auxiliary on Sunday afternoon, to the drawing of prizes following the final business session and installation of officers on Wednesday at noon.

All members should make a special effort to hear the President-Elect of the American Dental Association, Dr. Hubert A. McGuirl, Sunday night. This is one of the few opportunities that most of us have to keep up and be informed about dentistry on a national level.

Our scientific program is based on the policy of dental conservation. Dr. Rex Ingraham and Dr. Francis Scott both can enlighten us on the latest ways and means of conserving the natural dentition. Dr. John Ott's presentation on the influence of light on living things, we understand, is a most entertaining program. This is something of the unusual, and a deviation from the typical dental program. It could, however, prove to be one of the highlights. Wives are especially invited to this part of the program.

Since this is my last opportunity in print, I do now want to thank you for the privilege of serving as your President. The year has been very active and enjoyable. And to those who have helped me during my term of office with the many jobs and duties that I have had to delegate, my everlasting gratitude.

GEORGE F. KIRKLAND, JR.

#### **Editorials**

EDITOR'S NOTE: Dr. Edwards is the immediate past president of the Fifth District Dental Society. This editorial is based on his annual report to the District last Fall.

#### WHAT HAVE YOU DONE FOR DENTISTRY LATELY?

There is not anything as stimulating to an organization, community, or state as new members to contribute fresh ideas and enthusiasm. To all new members of our Dental Society, let me urge you to affiliate with some study club. Nationally, the trend is to require additional post graduate training each year in order to renew a license. Florida legislature nearly enacted a law requiring twenty-five hours of post graduate training for each dentist per year in order to maintain his license. A study club is a logical vehicle for such training. If I had to choose a subject of interest, I would suggest occlusion. Occlusion is the key to all phases of dentistry.

A dentist would hope for a practice so organized that another dentist could step in and take over if necessary. An example, is a dentist in Goldsboro, who during his confinement had other dentists in Goldsboro complete his unfinished dentistry and conduct his recall system. At least one day a week his office was open. This is a challenge to all of us.

What have you done for dentistry lately?

ZENO L. EDWARDS, JR., D.D.S. PROFESSIONAL DENTAL BUILDING WASHINGTON, NORTH CAROLINA

#### ANNUAL DISTRICT OFFICERS CONFERENCE

The purpose of this meeting is to set goals for the Dental Society at all levels and to formulate plans for their accomplishments. It is composed of men dedicated to improved concepts of dentistry. The pulse of dentistry can be taken better at this conference than at anv meeting. The men in attendance give their time, knowledge, and energy to better the profession for you, their fellow dentists. The result is evidenced by the constantly improving dentistry in North Carolina.

#### YOUR CHOICE— DENTISTRY'S CHANCE

As we become involved in the Federal health programs, what path will dentistry take? These programs call for comprehensive dental care and we should not give anything less. The patient's ability to pay can no longer be used as the excuse for anything less than restoring the padental optimal through the realms of available dentistry today. Dentistry has choice, will the premium be placed in quality or quantity?

#### Letters to the Editor

FEBRUARY 2, 1968

Dear Editor and Associate Editor:

Up to this time I have refrained from becoming involved with newspaper editors concerning the irresponsible attitude that they have taken in reporting some remarks made by me at the recent A.D.A. meeting in Washington, D. C. But I find it somewhat disturbing that the editors of the North Carolina Dental Journal use similar tactics to make their editorials eyecatching and supposedly more popular. I refer to last month's editorial commenting on a recent editorial from the *Charlotte Observer*.

The editorial, That Dental Cavity's On The Hip, Charlotte Observer, November 5, 1967 was the result of a misinterpretation and twisting of facts concerning an essay which I presented before the A.D.A. last November. As most of us know, newspapers tend to print what they feel will be most readable by the public. Such was the case concerning my essay on the economic aspects of preventive dentistry. I apologize to the profession for the embarrassment caused by an errant reporter's desire for sensationalism. However, I do not apologize for the content of my essay which emphasized the importance of preventive dentistry and the need for more practitioners to develop a philosophy of prevention in their offices.

There are several major points which were misrepresented in the newspaper reports and editorials which I would like to clarify now.

The theme of my essay was not concerned with the establishment of fees for preventive dental procedures. Rather, it described the surprising reluctance of dentists to incorporate preventive dental procedures in their practices. It went into detail on the 1959 report by the National Opinion Research Center on preventive dentistry. This report illustrated that many dentists felt preventive dental procedures not remunerative and therefore not economically feasible in their practices. My essay attempted to encourage dentists not to take this attitude and to place an economic value on preventive dentistry so that they might spend more time preventing dental disease rather than repairing the ravages of its effects.

My comments concerning the establishment of fees for these services covered two paragraphs in a 15 page report. I did not recommend nor have I ever recommended that dentists charge \$20.00 per hour for their services. I did mention that a method available for establishing fees for oral hygiene instructions, topical fluoride treatments, or any other preventive dental measure might be made on an hourly fee basis. Those dentists who feel that a restorative procedure or a surgical procedure is necessary before a fee may be charged, might find it convenient to place their preventive dentistry services on an hourly basis.

The newspapers also failed to include that portion of my essay describing

the many procedures that are now available for the prevention of dental disease. They failed to include the many steps that the dental profession has taken to prevent dental caries, periodontal disease, and malocclusion. My essay discussed the studies on fluoridation, topical fluoride application, and routine dental care that indicate a decrease in dental disease. Preventive dentistry is one of the answers to our country's dental needs and my essay was only a small part in calling it to the practitioners' attention and encouraging the incorporation of its philosophy in all practices.

It seems to me that the editors of the NORTH CAROLINA DENTAL JOURNAL have shown poor judgment in commenting on a paper that neither of them heard nor read in its entirety. Their sole contact with this essay was secondhand from what they read in the newspapers. Does their position as editor and associate editor give them the right to openly criticize before all of the facts are presented? How much better would it be if they spent their energies toward building better public relations between the dentists in the state rather than attempting to destroy this relationship by openly criticizing one of its members?

I do not intend to enter an editorial debate on the ethics involved in responsible editorializing, so my comments will end with this letter. I do feel that the editors have unwisely used their given "power of the pen" in openly criticizing a situation of which they were grossly uninformed.

I respectfully request that you publish this letter in the next issue of the NORTH CAROLINA DENTAL JOURNAL

THEODORE R. OLDENBURG, D.D.S.
ASSOCIATE PROFESSOR
DEPARTMENT OF PEDODONTICS
U.N.C. SCHOOL OF DENTISTRY

#### EDITOR'S COMMENTS

What appears in the news media is of the greatest interest to the practicing dentist because he stands before the public daily. He is the one who must answer their questions.

It is not the editor's intent to try to bring sensationalism to the readers but to bring to their attention events that are of interest. Comments, nationally reported, about a North Carolina dentist would naturally be of interest to the dentists of this State. And if these comments were quoted in a controversial way, the editor hopes the Journal will serve as a medium for both writer and readers to come to a greater understanding, through expounding and clarifying. Only by communication can the practicing dentist, educator, and the public build greater bridges of understanding. Do not all of us share the same goals for dentistry—that being better dental health for all?

# An Appraisal of Temporomandibular Joint Pain-Dysfunction

By Don L. Allen, D.D.S. and Walter T. McFall, Jr., D.D.S.

#### PART I

#### NATURE, ETIOLOGY, AND DIAGNOSIS

Without question the most challenging, and unfortunately the most poorly understood problem which the dentist is confronted with is the patient with vague or bizarre pain or discomfort in the facial area. The most common type seen is that usually referred to as "Temporomandibular Joint Disorder." This indication is unfortunate, and as will be pointed out later in this paper, is usually a misnomer in that most patients presenting with the symptoms of this problem do not have disease of the temporomandibular joint.

The purposes of this paper are to explain the nature of the so-called

"TMJ Disorder" as it is seen in most patients, to discuss the etiological factors involved, and to present an approach to diagnosis. A subsequent paper will discuss treatment.<sup>1</sup>

#### Nature

Pain or discomfort usually in a vague, ill-defined area but in the region of the temporomandibular joint

Drs. Allen and McFall are associate professors, Department of Oral Pathology and Periodontology, University of North Carolina School of Dentistry, Chapel Hill, N. C.

is the patient's chief complaint. The pain may be localized or may be diffuse and radiating. Sharp, severe pain can usually be related by the patient to a specific event (blow, yawn) which occurred in the previous few days. Dull pain or discomfort cannot be related to a specific event, and in many cases the patient has been aware of this symptom for several weeks or even months before seeking attention. In practically all cases the pain is unilateral.

In most situations there will be limitation of function in that the patient cannot open the mouth to the degree he normally can, or he cannot move the jaw laterally without producing pain. Less than one half of the patients will complain of dizziness. tinnitus. headache. or hearing impairment.2 Crepitus or popping of the joint may be reported by the patient or observed by the dentist. This finding appears to be rather meaningless since it is observed in many patients who have no other symptoms.

Temporomandibular joint paindysfunction is seen about three times as frequently in females as in males.<sup>2, 3</sup>

The attention of the dental profession and the role of its responsibility for the management of pain in and around the temporomandibular joint were directed by publications of Costen.4, 5 However, more recently a concept has developed that the nature of the problem is not that as described by Costen.6 The symptoms manifested in the joint area may be due to pathological changes in the joint itself due to systemic disease (rheumatoid arthritis, infection), or to joint disease of a local nature (traumatic arthritis fracture). but most frequently are due to hypertonicity or spasm of the masticatory musculature. Because of the results of investigations reported in the last decade and because of greater experience gained by successfully treating numerous patients, a very definite impression has developed that in most patients the problem is of a muscular nature with possibly only secondary joint involvement. In most cases the muscular problem is one of hypertonicity or spasm and is due to overactivity of the muscles of mastication resulting from bruxism or some other dysfunctional occlusal habit.

One of the first studies which reinforced the muscular concept was presented by Campbell.<sup>3</sup> A clinical charting of pain distribution was performed on 899 patients with symptoms in the temporomandibular area. The pain, which of course is the major symptom of the disorder, tended to concentrate in the areas of the origins and insertions of the muscles of mastication and the suprahyoid muscles. Electromyographic studies of patients with the symptoms usually attributed to TMJ disorder have shown that the symptoms relate to hypertonicity, and that when this is relieved by treatment the symptoms disappear. 7, 8, 9

It is possible that pathological changes may occur in the joint itself due to overactivity of the mandibular musculature. In any case, the primary nature of the problem appears to be muscular rather than joint. It is apparent then that therapy should be directed toward the muscle problem and more specifically toward the cause of the muscle problem.

#### **Etiology**

Since only rarely are patients seen with TMJ disease of an organic or

systemic nature,6 this discussion will be concerned with the typical patient with TMJ pain-dysfunction seeking treatment by the dentist. The primary factor involved in the etiology is muscle hypertonicity as a result of excessive occlusal function. This may be described as bruxism. bruxomania, clenching, clamping, or grinding of the teeth. However, since the line of demarcation between these different types of excessive occlusal activities is extremely nebulous, bruxism will be used in this paper in reference to any condition of habitually bringing the teeth together excessively for non-functional purposes.

There seems to be two significant factors in the production of bruxism: psychic stress and occlusal disharmonies.<sup>2, 6, 9</sup> The degree of psychic stress and occlusal disharmonies needed to result in bruxism is, of course, an individual consideration and will vary from patient to patient. One patient may have a near-perfect dental occlusion and brux because of extreme anxiety or worry. Another patient may be easily disturbed psychologically and develop a bruxing habit as part of the manifestations to stress which another person would pass off as simple dayto-day living. A more philosophical individual may have an atrocious dental occlusion but never develop bruxism.

In an electromyographical and clinical investigation of 32 patients with TMJ dysfunction and muscle pain, Ramfjord<sup>9</sup> reported that a discrepancy between centric relation and centric occlusion was the most common occlusal disharmony present. Non-functioning side (balancing) interferences were also observed. In no case was a distal dis-

placement of the mandible or mandibular overclosure the cause of the problem.

The excessive use of the musculature in bruxism results in hypertonicity. This increase of tension of the muscles appears to act as an added irritation which results in both a stimulus to continue bruxing and to diminish the normal protective mechanism that might otherwise help stop the habit.

The symptom of pain is probably produced by muscular fatigue and the accumulation of metabolic products in the muscles due to impaired circulation.<sup>8, 11</sup> If the condition reaches a point of spasm, the muscular coordination will be extremely poor, the patient will be distressed and in acute pain, and function will be very limited.

#### Diagnosis

Most patients presenting with the symptomatology previously mentioned will have a diagnosis of TMJ muscle pain-dysfunction. Diagnosis consists of ruling out the less frequent organic or systemic involvement of the joint, traumatic injury, and neuralgia. If a diagnosis of muscle hypertonicity is reached, determination of the etiology is mandatory for optimal treatment. While it can be assumed that in most patients with a chronic problem bruxism is the exciting cause, rational therapy would dictate a determination of the factors causing the bruxism. Many times this cannot be accomplished and an assumption of psychic tension and occlusal disharmony must be accepted as the cause of the bruxism. However, other factors such as pulpitis, periodontal abscess, or periapical involvement have to be ruled out since these and other acute and painful conditions may result in muscle hypertonicity.

There is no one procedure which will unequivocally confirm a diagnosis of TMJ muscle pain-dysfunction or bruxism. In most situations the dentist must utilize an innovative approach personalized for each patient. An adequate history and clinical examination are the most significant diagnostic procedures. Radiographs, pulpal sensitivity determinations, and psychological essay of the patient may be useful adjuncts.

#### History

A general medical history should be obtained. A history of arthritis, infectious diseases known to involve the joint, trauma, and certain syndromes could indicate true joint involvement. However, patients with positive histories in these regards may also be suffering from muscle hypertonicity related to the occlusion. More frequently the patient will have a negative medical history. and history will revolve around gathering information relative to the symptoms. The duration of the pain may be extremely significant. If the patient has been aware of the problem for only a few days and can relate it to a specific event such as biting into a hard object, no treatment at all may be indicated. If, however, the patient has had the problem for some time and is not sure when the onset was, the situation is more likely to require therapy.

Most patients do not have continuous pain or discomfort. It is important to determine when they are bothered. If the pain is mainly in the morning or if they are awakened at night with it, it is likely that it is related to nocturnal bruxism. If they

notice it in association with certain vocational activities (typing, letter writing) or certain avocational activities (sewing, card playing), they are probably bruxing while doing these activities. If the symptoms usually develop in association with stressful situations (menses, examinations), it is probable that psychic stress is the predominant etiological factor.

Very few patients are aware of bruxism. Direct questioning will usually not be productive. Sometimes other members of the family will be aware of this habit while the patient is not. A positive diagnosis of bruxism is difficult to make, but clinical findings are usually more helpful than are historical ones. Patients who have denied bruxing on the initial questioning may report later that thev are aware of the habit.

#### Clinical Examination

Examination should begin with an evaluation of the head and neck. Hypertrophy of the masseter muscle is strongly suggestive, but a not too frequent sign of bruxism. Quite frequently contractions of the head and neck muscles can be observed as the patient bruxes while the history is taken. This is especially noticeable in the temporal and masseter muscles. Palpation both extraorally and intraorally may demonstrate muscle hypertonicity and elicit pain if pressure is applied to the involved muscle.

Limitation and deviation in mouth opening should be observed. The amount of opening should be measured and recorded for later reference as an index of the patient's response to treatment.

An evaluation of the patient's

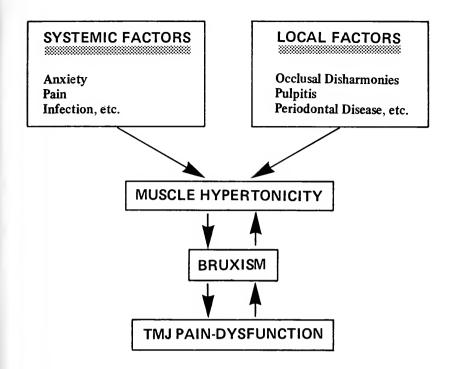


Figure 1. Schematic representation of the interrelationships and cyclic nature of the etiology and symptoms of temporomandibular joint pain-dysfunction.

dental and periodontal status should be determined. Patients may become asymptomatic following treatment of acute inflammatory conditions of the teeth or periodontium with no specific therapy for the muscles.

Mobility of teeth, excessive or unusual occlusal wear patterns, tooth fractures, maxillary and mandibular exostosis, tooth migration, and food impaction are suggestive of occlusal trauma and bruxism.<sup>12</sup>

Tantamount to a complete examination is a detailed functional occlusal analysis. An excellent procedure for occlusal analysis is presented by Ramfjord and Ash.<sup>12</sup> The determination of occlusal prematurities, mandibular slides in centric, and eccentric interferences is necessary for adequate treatment planning.

It must be realized that because of the nature of this muscular problem many patients cannot be analyzed adequately from a functional occlusal standpoint at the initial visit. Pain, muscle incoordination, and muscle spasm may preclude occlusal analysis. It may be necessary to place the patient on muscle relaxants and analgesics or make an

occlusal bite guard or even do a partial occlusal adjustment before the muscle tone is reduced to a point that complete occlusal analysis can be accomplished.

#### Radiographs

Most frequently radiographs of the temporomandibular joint are not helpful in diagnosis. 13, 14 This, of course, is because in most cases the problem is not in the joint but in the attaching musculature. Osteophytic changes of osteoarthritis, neoplastic alterations, or fracture may appear radiographically. These are rare findings but, nevertheless, must be determined.

Unfortunately, the image of anatomical features of the joint are not reliably reproduced on radiographs.15 There is so much variation in the pattern of movement of the mandible that even cinefluorographic techniques are of little assistance.16

Dental radiographs are more helpful in diagnosis. Increase in width of the periodontal ligament uneven or discontinuous and lamina dura. a generalized radiopacity of the alveolar bone indicate occlusal trauma and bruxism. The determination of dental caries or periodontal or periapical abscess may indicate one aspect of the etiology of muscle hypertonicity.

#### Summary

In most cases pain, discomfort, or limitation of function in the area of the temporomandibular joint are of a muscular rather than a joint nature. The problem is one of muscular hypertonicity and is usually caused by bruxism, Bruxism may have a complex etiology but the most significant factors are psychic tension and occlusal disharmony. Diagnosis is based primarily on historical information and clinical examination.

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The stomatognathic system represents an arrangement of parts — teeth, periodontium, and joints—functioning by dynamic muscular action under central nervous system control. Since any of these anatomical areas may be subject to injury the potential for damage is inherently great. That temporomandibular joint pain-dysfunction does not occur with greater frequency is attributable to bodily resistance and adaptation.

Acute injury to the stomatognathic system occurs most commonly with sudden trauma such as automobile accidents. As was pointed out in the first part of this paper, the majority of these disturbances are of a more chronic nature and result from a failure of some part of the system to adapt to repeated microinsult.<sup>1</sup> Chronic problems are more difficult to diagnose and treat than the acute injury.

#### **Therapy**

Most treatment is predicated upon detection and elimination of causation. Ultimately healing is dependent upon bodily repair. In the temporomandibular joint pain-dysfunction condition diagnosis may be complicated by subtleness of etiology, restriction of mandibular movement, oral or facial pain, or emotional distress.

Even when the causative factor or factors can be ascertained immediate therapy is not always practical or feasible. For example occlusal interferences may be the eliciting cause of the problem, but occlusal adjustment may be complicated by concomitant muscle spasm. Thus, initial treatment must often

take the form of patient reassurance and pain relief.

Firm doctor-patient relationships emphasizing an understanding of the patient's discomfort are best established early during therapy. An appreciation of the mechanism of the process and the realization that their problem is not unique or imagined will do much to relieve patient anxiety. Analgesics are usually successful in controlling the painful aspects of this condition.

#### Types of Therapy

Since the causes of the temporomandibular joint pain-dysfunction problem may be multiple and the damage may occur in various anatomical locations, therapy must, of necessity, also be diverse. In general the therapeutic measures are directed toward elimination or minimization of destructive factors.

1. DENTAL TREATMENT: Reappraisal of this condition has emphasized that of all types of therapeutic measures those that are strickly dental are the most useful. Of these, the acrylic bite guard (night guard, bite splint) has been most successfully employed.

These hard plastic appliances serve a number of functions including mitigation of destructive dysfunctional forces, minimization of occlusal trauma, stabilization of mobile teeth, and muscle rest. One of the difficulties previously experienced with this appliance was the inability to achieve a comfortable, durable, stable, easily fabricated bite guard. A reliable method requiring minimal chair time and producing high degrees of patient acceptance has been formulated.<sup>2</sup>

Dependent upon the nature of the

problem, bite guards will be worn variable periods of time. Patients with muscular spasm or joint pain may need to wear the guard only till relief from symptoms occurs. In cases of advanced periodontal disease, destructive habit patterns, or tooth mobility, indefinite utilization of the device may be indicated.

Occlusal adjustment is a proven, acceptable method of dealing with pain dysfunction symptoms resulting from the presence of prematurities or interferences in the occlusion. These occlusal irregularities may initiate habits, cause trauma to the periodontium, or result in muscle spasm. It has been demonstrated that bruxism can be reduced with occlusal adjustment.<sup>3</sup>

Because of pain, restricted mouth opening, or uncertain occlusal relationships: selective grinding may best be delayed until other measures achieve pain relief and muscular relaxation. In a typical case with occlusal problems it may be possible to eliminate gross interferences before bite guard construction. Once muscle relaxation is obtained definitive occlusal adjustment is accomplished. This might require several appointments in order to obtain an occlusal relationship with a stable. harmonious tooth contact in the centric range, elimination or minimization of functional or non-functional interferences; and reduction of dysfunctional habits.

Numerous dental pathological situations may play a role in the etiology of this syndrome. Appropriate dental therapeutic measures should be instituted when missing teeth, loss of posterior support, faulty operative dentistry, or pulpal or periodontal diseases exist. In some instances extensive reconstruction may be required, and these prostheses newst be placed with careful attention toward occlusal considerations. Indeed, all restorative dental procedures require special consideration since these patients may be extremely occlusion - conscious. It might be necessary to construct bite guards after the restorative therapy is accomplished.

2. Pharmacological Treatment: A wide range of pharmacological agents have been developed to deal with various aspects of the joint pain problem. Most of these are intended only for short term therapy. Many analgesics are suitable for pain control, and narcotics seldom are necessary.

When it can be definitely established that a muscle spasm is present several drugs can be employed. The most useful in controlling muscle hypertonicity are the muscle relaxant drugs Robaxin (methocarbamol) and Skelaxin (metaxalone). These drugs do not interfere with voluntary muscle activity, but apparently act to interrupt asynchronous, nonvoluntary muscular activity. In extreme spasms topical dermal application of ethyl chloride spray or intraoral muscular injection of procaine may be effectively utilized.<sup>4</sup>

If it has been ascertained through history, physical examination, or radiographic appraisal that arthritis plays a significant role in the development of this condition, there may be justification for corticosteroid therapy. It is preferable that this therapy be given in consultation with the patient's physician. Injection of steroids directly into the joint should not be attempted until easier, more conservative methods have been tried.

3. PHYSICAL THERAPY: Use of

physical measures can be of aid in the relief of certain symptoms associated with this syndrome. Restriction in the amount of mouth opening may be aided by muscular exercises against physical resistance. Simple opening and lateral mandibular movements against the patient's braced hand several times each day will gradually relieve muscle tension.<sup>4</sup>

In other instances it is wise to avoid actions which will aggravate the temporomandibular joint. These patients should restrict mandibular activity by minimal speech, shouting or yawning, and injection of a soft diet.

Heat seems to aid in providing temporary comfort, and heat packs and heating pads are useful when pain centers in or near the joint.<sup>5</sup> Particularly is this of advantage in case of severe arthritis.

- 4. SURGICAL TREATMENT: Surgical operations involving the joint itself have been utilized in the past. Since most evidence suggests that pain is referred to the joint area rather than originating in it, surgery of the condyle or meniscus is a rather radical approach. In the numerous cases treated at the University of North Carolina, it has not been necessary to use surgery in a single instance.
- 5. PSYCHOLOGICAL TREATMENT: Certainly emotional factors play a role in a percentage of patients with temporomandibular joint pain-dysfunction. However, it is dangerous to pass on these patients' complaints as simply expressions of an unstable individual. Most of the manifestations of this pain problem have an organic origin, and are treatable by the dentist.

When it is suspected that severe

emotional anxiety is a part of the overall etiology, a physician or psychiatrist should be consulted. If the individual is able to maintain normal activity dental therapy may be sufficient to handle the problem. While sedatives or tranquilizers can be prescribed, these should be used only with caution. Often these are exactly the therapy previously unsuccessfully employed by the patient's physician prior to the patient seeking relief through dental means.

#### Summary

Temporomandibular joint paindysfunction is a vexing problem which may have a complex etiology. Reappraisal of this condition indicates that the vast majority of the causative factors can be identified. Treatment of this problem is primarily a responsibility of the dental profession. A number of therapeutic measures are available for correction of the causes of this condition. Bite guards and occlusal adjustment are the methods most commonly employed. In the main, the evidence suggests that conservative therapy produces a high degree of success. U. N. C. SCHOOL OF DENTISTRY CHAPEL HILL, N. C.

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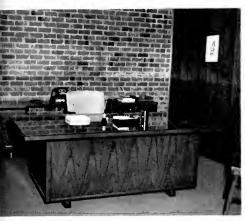
#### **New Central Office**



CONFERENCE ROOM



**WORK ROOM** 





EXECUTIVE SECRETARY'S OFFICE

#### 120 East Peace Street

Members are cordially invited to visit the new Central Office at the corner of East Peace and North Blount streets in Raleigh, just four blocks North of the Governor's Mansion and one block East of Peace College.

Last May the Central Office moved bag and baggage into a new brick building of colonial design. The new quarters include offices for the executive secretary and staff, a conference room, work room, and filing area, attractively decorated in walnut paneling and wainscoting. The offices occupy 1,300 square feet. Ample parking facilities adjoin the building.

Grateful acknowledgement is made to Dr. Gerald F. McBrayer and Knob Creek of Morganton for the gift of a custom made candlestick lamp to the Central Office. It is an attractive addition to the reception room.

The mailing address remains the same—P. O. Box 11065, Raleigh, N. C. 27604—and the telephone number is still 832-6746 (Area Code 919).

Office hours are from 8:30 a.m. to 4:30 p.m., Monday through Friday.

# Preventive Dentistry For Postoperative Hemorrhage



by Richard F. Hunt, Jr., D.D.S.

#### I. INTRODUCTION

Postoperative hemorrhage is a complication that is frequently encountered in dental practice and every dentist should be familiar with the problems it presents.

The majority of postoperative bleeding problems are local in origin and usually present little difficulty in management. However, bleeding problems resulting from one of the hemorrhagic disorders are occasionally encountered. The dentist should maintain a constant vigilance to detect these patients. If dental surgery is needed, they should not be managed in a dental office on out-patient basis, but should be referred to a medical center where a team consisting of an internist, a hematologist, and a dentist will assume responsibility for their treatment. This discussion will include methods of detecting patients with hemorrhagic disorders, but will not discuss the management of their bleeding problems.

Prevention is the best treatment for postoperative hemorrhage. This requires the utilization of proper preoperative and postoperative measures.

#### II. MEASURES TO PREVENT POSTOPERATIVE HEMORRHAGE

- 1. Preoperative Evaluation of the Patient:
  - a. The purpose of preoperative evaluation is to detect those patients with a bleeding problem.
  - b. The preoperative evaluation should include:
    - (1) A history of previous bleeding.
    - (2) A thorough examination.
    - (3) Use of certain laboratory procedures.
  - c. The history should include:
    - (1) Bleeding associated with previous extractions.

- (2) Bleeding associated with other surgery or trauma.
- (3) Systemic bleeding disorders.

(4) Tendencies for easy bruising.

(5) Medication such as dicumerol, Hephrin, etc.

#### d. Examination:

A careful examination of the patient may reveal findings that indicate bleeding tendencies:

(1) A pale color may indicate leukemia.

(2) Swollen joints may indicate hemophilia.

- (3) Petechia hemorrhage may indicate vascular or platelet defects.
- (4) Spontaneous bleeding may indicate a platelet or prothrombin deficiency.

#### e. Laboratory Tests:

(1) If the history or examination indicates the possibility of a bleeding problem, certain laboratory tests are indicated to determine if a bleeding problem exists:

They should include

(a) Prothrombin time, 12 to 14 seconds—normal.

(b) Platelet count, 200,000 to 400,000—normal. Below 50,000 platelets—danger.

f. If these indicate a hemorrhagic disorder exists, surgery is hazardous and may result in bleeding of major proportions. These patients are best treated in a medical center where facilities and personnel are available to manage their problem.

#### 2. Proper Attention to Surgical Principles

- a. A further means of preventing postoperative bleeding is by strict adherence to certain cardinal surgical procedures. These should include:
  - (1) Flap Design: Proper attention to correct flap design to avoid major vessels.
  - (2) *Debridement:* Complete debridement of the operative wound, being sure granulation tissue, bone fragments, and irregular sharp bony spicules are removed.
  - (3) *Hemostasis:* Be sure the hemorrhage resulting from the surgical procedure is arrested before the patient leaves the office.

#### 3. Use of Hemostatic Agents

- a. If excessive bleeding is encountered at time of surgery, or if bleeding problem is anticipated, the application of hemostatic agents to the wound at time of surgery will frequently prevent postoperative bleeding. The following agents may be utilized:
  - (1) Absorbable hemostatic agents (Surgical, Gelfoam, Oxycel, etc.)
  - (2) Gauze packs.
  - (3) Sutures. (They will also bring patient back to office for observation.)

#### 4. Postoperative Care

- a. Protect the Wound from Trauma: A gauze dressing or splint placed over the wound prevents trauma to the operative site.
- b. Continual Pressure on Operative Site: Pressure on the operative site should be maintained for a minimum of one hour.
- c. *Postoperative Instructions*: It is wise to give the patient written postoperative instructions. The following are suggested:
  - (1) DO NOT rinse your mouth until the day after surgery. You may eat or drink anything you like, but DO NOT RINSE YOUR MOUTH.
  - (2) The day after surgery, use a warm salt water mouth wash (½ teaspoonful of salt to a glass of warm water). Use after each meal and at bedtime.
  - (3) If you were told to use cold, apply an ICE CAP to the face alternately, 40 minutes on, 20 minutes off, for 4 hours following surgery.
  - (4) Take prescribed tablets as directed every 3 hours to 4 hours as necessary to relieve pain. DO NOT take tablets if you have no pain.
  - (5) If excessive bleeding occurs, a tea bag should be placed over the bleeding area. Hold firmly in place by closing teeth. If abnormal bleeding persists, call or return to office immediately.
- d. *Ice Cap*: An ice cap applied to the face will slightly decrease local circulation and assist in the prevention of postoperative bleeding.

#### III. MEASURES TO ARREST HEMORRHAGE

#### 1. Home Care

a. Use of sodium hypochlorite mouth wash: This solution is beneficial in arresting minor bleeding problems. The patient should be instructed to rinse the mouth with this solution until colorless. Then hold a small quantity in the mouth for five minutes in an attempt to arrest the bleeding. Inform patient the first rinse may be a dark brown color. (Sodium Hypochorite is available in most homes in the form of Zonite or Clorox.) As a mouth wash, these solutions should be diluted as follows:

Zonite—dilute with 5 parts of water.

Clorox—dilute with 25 parts of water.

- b. Pressure applied to operative site: A piece of gauze or a tea bag should be placed over the bleeding area and patient instructed to maintain firm pressure by closing teeth on the pack.
- c. Rest and application of cold: An ice cap should be placed to the face and the patient instructed to rest.

#### 2. Office Care

a. If the above measures do not arrest the bleeding, the patient must be seen in the dental office. The dentist should have the proper instruments and hemostatic agents available to arrest the bleeding.

#### b. *Initial procedures*:

(1) Anesthetize the bleeding area.

(2) Apply pressure to bleeding area with a gauze pack.

(3) Remove visible evidence of bleeding.

(4) Determine location and type of bleeding. (The bleeding will be arterial, venous, or capillary and it will be coming from the soft tissue or the bone.)

#### c. Bleeding from bone:

- (1) If bleeding arises from bone, it may be arrested by packing the bleeding area with an absorbable hemostatic agent or gauze.
- (2) Absorbable hemostatic agents (Surgical, Gelfoam, Oxycel, etc.) may be left in the wound; however, if gauze is used to pack the wound it must be removed several days after the bleeding has been arrested.
- Sutures are very effective to retain the absorbable hemostatic agents or gauze in the wound.

#### d. Bleeding from soft tissue:

- (1) If bleeding arises from the soft tissue, the application of blanket sutures in the bleeding area will usually arrest the
- (2) In arterial type bleeding, the bleeding point may be grasped with a hemostat and a suture placed about the severed vessel. An alternate method is to cauterize the bleeding point with electrocautery.
- e. In persistent bleeding problems, a topical hemostatic agent may be of value. These fall into several broad categories.
  - (1) Mechanical (splints, gauze, packs, etc.)
  - (2) Astringents and Caustics (Tannic Acid, Monsel's Solution, Feric Chloride, Aluminum Chloride, etc.)
  - (3) Biologicals (Thrombin, Thromboplastin, Adrenaline, etc.)

#### 3. Postoperative Care:

- a. When the bleeding has been arrested, proper postoperative care is essential. It should include:
  - (1) Continual pressure on operated area.
  - (2) Application of cold.
  - (3) Rest.

#### 420 HICKORY ST.

ROCKY MOUNT, NORTH CAROLINA

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# National Children's Dental Health Week In North Carolina February 4-10, 1968

In Asheville, the Buncombe County Dental Society presented electric tooth brushes to the Asheville Orthopedic Hospital. Below, Hygienist Jackelyn Morris gave the youngsters instructions on proper brushing, while Hygienist Jean Stines and Dr. Thomas A. Morris looked on.



On the right is one of several displays in department store windows in downtown Goldsboro, a project of Hygienists Linda Heekin and Charlotte Berry.

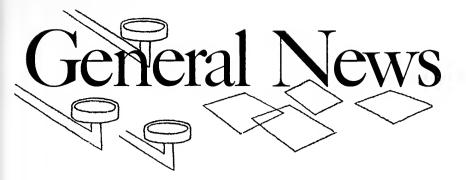


Below, are the winners in the poster contest sponsored by the Dental Society and Auxiliary of Forsyth County. Over 100 posters were entered by sixth grade students in Forsyth County schools. Marty Shore of Kernersville won first place with her poster which reads "Be like the rabbit, have a habit, brush daily, smile."





Paul Lincke III, a third grade student at Teachers Memorial School in Kinston receives a \$25 Savings Bond from Dr. Stephen A. Brooks for coining the winning slogan in a contest sponsored by the Lenoir County Dental Society. The county-wide contest was open to children in the first to sixth grades. They were asked to name and give their reasons for the name of a drop of fluoride. Paul's winning name was "Pro-tee-Flo"—"Protect Your Teeth With Fluoride."



#### Mandatory Fluoridation

The State Board of Health took the first step at its March 8 meeting toward obtaining legislative power to order all North Carolina cities and towns to fluoridate their drink-

ing water supplies.

The Board endorsed a comprehensive Statewide study which would lead to recommendations of fluoride-treated water supplies to the 1969 General Assembly. It would be conducted by State Health Director Jacob Koomen and his staff.

Dr. Lennox Baker of Durham, vice chairman of the Board offered the motion to support "the director in his effort to, in any way possible, get further fluoridation of the drinking water of the State."

Dr. Baker said he supported the study "to educate the people (and) to keep all agencies aware of the need for fluoridated water and to help them carry out additional programs".

grams."

A Raleigh newspaper stated that some members of both the Board and the staff indicated during the Board meeting and later privately that they generally favor uniform Statewide fluoridation.

Currently, fluoride can be added to a public water supply only by vote of a city council. Although the authority rests ultimately with the council, some governing bodies call a special referendum on the matter.

While the State Board of Health has endorsed the study of mandatory fluoridation, the proposal faces possible legal obstacles.

The State Attorney General's Office has ruled repeatedly that the State Board of Health and county boards of health do not now have the authority to require towns to fluoridate their water supplies.

Deputy Attorney General Harry McGalliard said in an advisory opinion on fluoridation April 21, 1965, "In my opinion, it is highly doubtful that enabling legislation would be held constitutional.

"Our (Supreme) Court is rather conservative and such a proposal would probably smack too much of the welfare state and be regarded as beyond the police power which the General Assembly could exercise."

According to Dr. E. A. Pearson, Jr., director, Dental Health Division of the State Board of Health, 83 communities in the State are now adding fluoride to their water. The water supplies of an additional 18 towns contain an optimum of natural fluorides and require no additives.

#### GTI Moves Ahead

A new health-science building will be constructed on the campus of Guilford Technical Institute in Jamestown to provide facilities for the training of dental hygienists and assistants. However, until Federal funds from the Higher Education Facilities Act become available, only one of the three floors of the proposed building will be finished completely. HEFA funds are being withheld in Washington as a part of the general cut-back in Federal spending.

Both dental auxiliary training programs have been supported in the past by funds from the Manpower and Development Training Act. The State is expected to pick up the tab for dental hygiene training in the future and funds for the next dental assistant program have already been underwitten by MD-TA.

Luther R. Medlin, GTI president, announced that Dr. George F. Mayer who has been post dental executive officer at Fort Bragg has been appointed chairman of the Health Science Division at GTI. He succeeds Dr. Arthur Stone who resigned several weeks ago. Dr. Mayer, who was a colonel in the U. S. Army Dental Corps, began his duties at GTI March 25.

#### Lab Association to Meet

The North Carolina Dental Laboratory Association will hold its annual business meeting on Saturday, May 4, at Holiday Inn, Southern Pines from 1:00 to 5:00 p.m.

According to Robert L. Jones, secretary-treasurer of the Association, a nationally known speaker on business management and labora-

tory economics will be on the program.

program.

Completing the agenda will be election of officers, award presentations, and reports from standing committees.

Current officers of the Association besides Mr. Jones are: V. E. McCoy, president; Carlton Newton, president-elect; and LeRoy Hargrove, vice president. Association directors include: Harold Sawyer, John Kubach, and Bill Carroll.

#### Perry J. Sandell Dies

Mr. Perry J. Sandell, assistant secretary for dental health affairs of the American Dental Association, died in Chicago January 4 in an automobile accident. He was 56.

Mr. Sandell, an internationally recognized authority in the field of dental health education, had been appointed ADA assistant secretary in February, 1967. In this position he had supervised the activities of the ADA Councils on Dental Health and Dental Care Programs and the Bureaus of Dental Health Education and Audiovisual Service.

Dr. F. Darl Ostrander, ADA president, in paying tribute to Mr. Sandell said that the "dental profession is deeply saddened by the loss of one of its most respected friends." He added: "Perry Sandell's work as the country's leading dental health educator has won him the profound esteem and admiration of all who had the privilege of knowing and working with him here in this country and abroad."

#### Oral Surgeon Recognized

Dr. W. Joseph Porter was recently elected secretary of the surgical staff at Mercy Hospital in Charlotte, a significant attainment and a real tribute to Dr. Porter, since the overwhelming majority of the staff members are physicians.

Dr. Porter's election is probably the first time a dentist has been so recognized in the Charlotte area.

#### Governor Appoints Charlotte Dentist

Dr. Amos S. Bumgardner of Charlotte has been named to the Governor's Advisory Council on Comprehensive Health Planning. He is the only dentist on the 47-man Council.

Governor Dan K. Moore announced the appointment at a statewide conference in Raleigh January 28 when North Carolina's program of comprehensive health planning was initiated.

The Council is charged with the responsibility of helping to formulate the initial plans for the future health program in the State.

# Second District Members Honored

Dr. Frank O. Alford of Charlotte was installed as president of the American College of Dentists last Fall in Washington, D. C.

Dr. Alford is a past president of the Charlotte, Second District and North Carolina Dental Societies and the Southern Academy of Periodontology. For nine years he served as secretary of the State Board of Dental Examiners.

At the same session Drs. Edward U. Austin of Charlotte and J. Harry Spillman of Winston-Salem were made Fellows in the American College of Dentists.

#### District Officers Meet

The 15th Annual District Officers Conference was held in Raleigh at Velvet Cloak Inn January 27 and 28. Total registration was 79, including 53 dentists. Originally scheduled for January 13-14, bad weather caused the Conference to be postponed two weeks.

Dr. John W. Girard, Jr. of Asheville, presided at the two-day meeting which got underway Saturday morning and continued until noon Sunday.

Saturday morning speakers included Dr. George F. Kirkland, Jr., Society President, who commented on the 1967 District Meetings and Dr. Charles W. Horton, past president of the Third District, who discussed the functions of a component society.

Saturday afternoon Dr. Roy L. Lindahl reported on the progress of the proposed North Carolina Dental Service Corporation, Dr. Freeman C. Slaughter briefed the Conference members on parliamentary law, and Dr. W. L. Hand, Jr. discussed changes in dental practice laws under consideration by the Dental Practice Act Committee. He was assisted by Drs. Roger E. Barton, Robert H. Sager and Olin W. Owen.

Following a social hour and dinner, an open house was held at the new quarters of the Central Office.

Sunday morning Dr. C. W. Poindexter, secretary-treasurer of the Society, surveyed activities of component societies throughout the U. S., Dr. E. U. Austin reported on the activities of the Dental Care Programs Committee, and Dr. E. A. Pearson, Jr. explained the objec-

tives of the State Planning Committee for Dentistry.

The Conference closed with a business session when officers for the coming year were elected. Dr. Maurice B. Richardson of Albemarle was named president. Dr. M. Lamar Dorton of Statesville was elected vice president, succeeding Dr. W. G. Ware, Jr., of Winston-Salem and Dr. Frederick G. Hasty of Fayetteville secretary, succeeding Dr. James L. Cox of Goldsboro.

The Conference will return to the Velvet Cloak Inn for its 16th annual meeting December 7-8, 1968.

#### New Degree Program at UNC

A new undergraduate program in dental auxiliary teacher education will be offered at the University of North Carolina beginning in the fall of 1968.

It will be the only degree program of its kind in the U. S.

The four-year course is designed to help remedy the most critical aspect of the nation's dental auxiliary programs — the shortage of qualified teachers.

Dr. James W. Bawden, dean of the UNC School of Dentistry, said in presenting the proposed course to the UNC Faculty Council that teacher education in dental auxiliary programs can be offered only in a university with a major health science center, a school of education and a college of arts and sciences.

"UNC at Chapel Hill is the only regional location in the South where this can be accomplished," he said.



DENTISTS TOUR TOOTHBRUSH FACILITY

DR. JOHN W. HEIN, left, director, Forsyth Dental Center, discusses one phase of the GE Automatic Toothbrush manufacture and testing with GE Quality Control Manager W. R. Jessup, and Drs. John Menius, Thurman Bulla, and Hal Davis of the Randolph County Dental Society. On February 15 Society members toured the GE facilities at Asheboro to see the development and production of the product.

University trustees gave final approval to the new program in January.

The new program will be administered by the School of Dentistry, School of Education and College of Arts and Sciences. The degree of Bachelor of Science in Dental Auxiliary Teacher Education will be awarded by the dental school.

Students in the program will spend the first two years in the General College at Chapel Hill and will devote the final two years to the professional areas of dentistry and education. All of the education courses will be in the senior year.

Since most of the graduates will teach in junior colleges or technical institutes, internship teaching has been arranged at Central Piedmont College in Charlotte for students during their senior year.

#### GE Toothbrushes Made in N.C.

General Electric Company is now manufacturing electric toothbrushes in North Carolina. In 1967, GE transferred its toothbrush manufacturing operations from Ashland, Massachusetts to Asheboro where it formerly made electric blankets.

Members of the Randolph County Dental Society were entertained at an open house by GE at the Asheboro plant on February 15. The group toured and inspected the manufacturing, research, and testing facilities which produce electric toothbrushes.

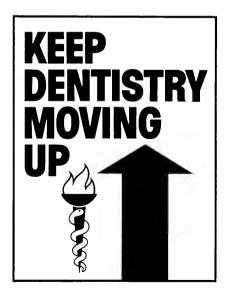
Society members were guests of GE at dinner that evening at the Asheboro Country Club and heard Dr. John W. Hein, director Forsyth Dental Center in Boston and special consultant to GE, speak of current research on electric toothbrushes.

Special guests of the Society for the event were Dr. E. A. Pearson, Jr., director, Dental Health Division of the State Board of Health and Andrew M. Cunningham, executive secretary, North Carolina Dental Society.

Dr. John W. Atwater, president of the Randolph County Dental Society, presided at the dinner meeting. Dr. Joseph R. Suggs, president-elect, was in charge of the program. Secretary is Dr. John W. Menius.

# **Ohituaries**

**Dr. A. C. Edwards,** 73, of Shelby, a life member of the First District Dental Society, the North Carolina Dental Society, and the American Dental Association, died January 24, 1968.



MAY IS AMERICAN FUND FOR DENTAL EDUCATION MONTH

## **Classified Advertising**

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#### 1968 DISTRICT MEETINGS

First District September 28-30 Grove Park Inn, Asheville
Second District September 22-24 White House Inn, Charlotte
Third District October 6-7 Mid Pines Club, Southern Pines
Fourth District October 12-14 Statler Hilton Inn, Raleigh

Fifth District September 14-16 Blockade Runner, Wrightsville Beach

Preliminary Program

# 112th Annual Session

North Carolina Dental Society

May 5-8, 1968
THE CAROLINA
PINEHURST





GEORGE F. KIRKLAND, JR. President



COLIN P. OSBORNE, JR. President-Elect



A. BREECE BRELAND Editor-Publisher



DENTAL





RALPH D. COFFEY Speaker



JAMES H. LEE Vice President



C. W. POINDEXTER Secretary-Treasurer



SOCIETY

1967 - 1968



FRANK G. ATWATER Chairman, Executive Committee



L. D. HERRING Chairman, Annual Session

## A.D.A. Guest Speakers



**HUBERT A. MCGUIRL, D.D.S.**Providence, Rhode Island

President-Elect American Dental Association

Sunday, May 5

8:30 p.m.

#### ASSOCIATION AFFAIRS 1968

Dr. McGuirl is a general practitioner and the first dentist from his State to serve as president-elect of the American Dental Association. He received his undergraduate training at Boston College and graduated in 1933 from the Georgetown University School of Dentistry. He has served as president of his constituent and component societies and is presently executive secretary of the Rhode Island State Dental Society and secretary of the Rhode Island State Dental Service Corporation.



ARTHUR W. KELLNER, D.D.S. Hollywood, Florida

FIFTH DISTRICT TRUSTEE
AMERICAN DENTAL ASSOCIATION

Sunday, May 5

2:30 p.m.

#### TRUSTEE'S REPORT

Dr. Kellner is a graduate of Chicago College of Dental Surgery and since 1953 he has represented Florida in the ADA House of Delegates. He is now serving his first term as Fifth District Trustee. Previously he served as a first vice president of the ADA, and president of the American Association of Dental Examiners.

## Essayists

#### REX INGRAHAM, D.D.S.

Los Angeles, California

Dr. Ingraham is distinguished professor and chairman of the Department of Operative Dentistry at the University of Southern California School of Dentistry, where he received his D.D.S. degree in 1941. He is director of the Human Factors Research Division at U.S.C., the first at a dental institution. A Fellow of the American College and the International College of Dentists, he is widely known as an author and lecturer.



Monday, May 6 9:00 a.m. and 2:00 p.m. Cardinal Ballroom

#### RESTORATIVE DENTISTRY

A comparative analysis will be made between the current fine- and micro-cut amalgam alloys and the newer spherical type amalgam alloys. Manipulative procedures will be recommended for producing the best physical properties and clinical results with both of these types of materials.

Standardized techniques for fabricating cast gold restorations will be demonstrated by slides and colored copies. Standardized and simplified procedures will be presented for each step required in impression taking, waxing, vacuum investing, controlled burn-out, casting and treatment of the casting before placement in the mouth will be outlined in detail.

Current trends in operatory design will be reviewed and methods for training a dental assistant for more effective utilization of auxiliary personnel will be discussed.

The basic principles of articulation and occlusion will be presented with emphasis upon the criteria of establishing a physiologically compatible occlusion. Patient demonstrations of rapid clutch construction and simplified methods for making panthographic registrations of jaw kinomatics will be carried on in conjunction with slide presentations and lecture.

## Essayists



#### FRANK T. SCOTT, D.D.S.

Jacksonville, Florida

Dr. Scott is president-elect of the American Academy of Periodontology. He graduated from Emory University School of Dentistry in 1938. His practice in Jacksonville is limited to periodontics. He is a past president of the Southern Academy of Periodontology and the American Society of Periodontology and a former member of the Florida State Board of Dental Examiners.

Tuesday, May 7 9:00 a.m. and 1:30 p.m. Cardinal Ballroom

#### PERIODONTIA AND THE GENERAL PRACTITIONER

Dr. Scott will discuss many phases of prevenive periodontics, including:

- 1. Diagnosis and treatment planning for the periodontally involved patient.
  - 2. Procedures necessary to prepare the patient for periodontal prosthesis.
- 3. Efforts used to coordinate the plans of the periodontist and the general practitioner in the development of optimum goals for reconstruction of the occlusion that has been mutilated by periodontal disease, tooth loss, and occlusal traumatism. This will be documented by kodachrome slides and case reports.
- 4. Motivation of the dentist in fulfilling his responsibility in achieving optimum dentistry for the patient.

## Essayists

JOHN N. OTT, Sc.D. Sarasota, Florida

Dr. Ott has been taking time-lapse pictures since 1927. He is executive director of the Environmental Health and Light Research Institute and has received citations for his work in photobiology from horticultural, scientific, and medical societies, including an honorary degree of Doctor of Science from Loyola University in Chicago. His most recent studies have been concerned with possible radiation effects from television, telephone microwave transmission towers and similar devices.



Tuesday, May 7, 3:20 p.m.

Cardinal Ballroom

# THE INFLUENCE OF LIGHT ON PLANTS AND ENVIRONMENTAL HEALTH

Over the past 40 years Dr. Ott has observed the effects on plants of both the photographic lights and those used for growing purposes in supplementing the restricted and filtered daylight entering the windows of his studio. In photographing the growth of a pumpkin for the late Walt Disney's film "Secrets of Life," he found that the slight difference in the wavelength energy output between cool white and daylight white fluorescent would control the sex of the blossoms.

His pictures show how different lighting conditions effect the process of photosynthesis in plants and thus act as a growth regulator. He points out similar responses in animals and suggests how these may be brought about as the result of light entering the eyes and stimulating the pituitary gland which controls the endocrine system.

Dr. Ott will report on his latest studies with plants and laboratory animals and will emphasize the importance of light as a human environmental health factor.

The lecture will be of interest to both laymen and professionals and dentists are urged to bring their wives to hear Dr. Ott.

# Program

8:00	Golf Tournament Pi	nehurst Country Club
1:30	Registration desk opens	Hotel Foyer
2:00	Commercial and Scientific Exhibits open	
2:30	House of Delegates, First Session	North Room
5:30	Lawn Party for Members and Guests	
	Sponsored by North Carolina Dental Auxil	iary
6:30	Dinner	
8:30	First General Session	Cardinal Ballroom
	Presiding: George F. Kirkland, Jr.	
	Invocation: J. Ernest Roberts	,,
	Necrology Service: Robert T. Byrd, president	
	Recognition of guests and allied organiz	ations
	Address: George F. Kirkland, Jr., Presi	
	Introduction of Speaker: Clyde E. Minge	
	Address: Hubert A. McGuirl, President-	
	Report: G. Shuford Abernethy, President,	Dental Foundation of
	North Carolina, Inc.	
Mond	lay, May 6	
7:30	District Officers Conference Breakfast	Crystal Room
7.50	Presiding: Maurice B. Richardson	
8:30	Scientific Film	Cardinal Ballroom
9:00	Reference Committees	
<b>,,,</b> ,	Committee A	TV Room
	Committee B	
	Committee C	
		Azalea Roon
	Constitution and Bylaws	Azalea Roon Camellia Roon
		Azalea RoonCamellia RoonArt Galler
9:00	Constitution and Bylaws Ethics President's Address	Azalea RoonCamellia RoonArt GallerDutch Roon
9:00	Constitution and BylawsEthics	Azalea RoonCamellia RoonArt GallerDutch Roon
9:00	Constitution and Bylaws  Ethics  President's Address  Restorative Dentistry, Part I	Azalea RoonCamellia RoonArt GallerDutch Roon
	Constitution and Bylaws Ethics	Azalea Roon Camellia Roon Art Gallery Dutch Roon Cardinal Ballroon
	Constitution and Bylaws Ethics	Azalea RoonCamellia RoonArt GalleryDutch RoonCardinal BallroonCardinal Ballroom
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12:00 1:30 2:00	Constitution and Bylaws	Azalea RoonCamellia RoonArt GalleryCardinal BallroonCardinal BallroonCardinal BallroonCardinal Ballroon

7:30	Past Presidents' Breakfast Crystal Room Presiding: J. Homer Guion
8:30	Scientific Film
9:00	House of Delegates, Second SessionNorth Room
9:00	Periodontia and the General Practitioner, Part I
	Cardinal Ballroom
	Francis T. Scott, Jacksonville, Florida Moderator: Guy R. Willis
12:00	Lunch
1:30	Periodontia and the General Practitioner, Part II
	Cardinal Ballroom
	Francis T. Scott, Jacksonville, Florida Moderator: Lloyd B. Stanley
3:20	The Influence of Light on Plants and Environmental Health
	Cardinal Ballroom
	John N. Ott, Sarasota, Florida Moderator: J. Harry Spillman
5:00	Fraternity Hour
5:30	Informal Social Hour for Members and Guests
	Cardinal Ballroom

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7:00	Annual Banquet Dining Room
	Toastmaster: W. Kimball Griffin
	Invocation: Luther H. Butler
	Presentation of President's Emblem: Guy R. Willis
9:00	Dance and Entertainment Cardinal Ballroom

Wedn	esday, May 8
7:30	Breakfast
9:00	Table Clinics
9:00	House of Delegates, Third SessionNorth Room
11:30	Third General Session Cardinal Ballroom
	Presiding: George F. Kirkland, Jr.
	Invocation: B. Edmond Kanoy
	Installation of Officers
	Awarding of Door Prizes
	R. B. Barden, Chairman, Exhibit Committee
	Adjournment, sine die
12:00	Lunch Check-out after lunch

#### HOUSE OF DELEGATES

1968

Speaker of the House: Ralph D. Coffey. Parliamentarian: Freeman C. Slaughter.

Sergeants-at-Arms: David H. Freshwater, Chief; Keith L. Bentley, Thomas C. Boykin, Matthew G. Delbridge, R. Hogan Gaskins, Jr., Frederick H. Howdy, William E. Kidd, Thomas A. Morris, James A. Privette, Phil S. Sanders, Bert B. Warren, Walter A. White.

#### **DELEGATES AND ALTERNATES**

State Officers: George F. Kirkland, Jr., Colin P. Osborne, Jr., James H. Lee, C. W. Poindexter.

Executive Committee: Frank G. Atwater, S. H. Isenhower, J. Homer Guion, L. B. Peeler.

Ethics Commitee: Joseph M. Johnson, Elliot R. Motley, C. W. Horton, C. Z. Candler, Jr., Darden J. Eure.

First District: Cecil A. Pless, Jr., Max W. Carpenter, William A. Mynatt, Francis A. Buchanan, Fenton S. Cunningham.

Alternates: John T. Adair, Dwight B. Hord, Robert B. Litton, William S. Prevost, Jr., E. Kent Rogers, III.

Second District: W. Stewart Peery, W. Smith Kirk, M. Lamar Dorton, M. Stevenson Thurston, William G. Ware, Jr.

Alternates: J. Harry Spillman, Horace P. Reeves, Jr., Robert A. George, James E. Graham, Jr., J. B. Freedland.

Third District: Maurice B. Richardson, L. P. Megginson, Jr., James B. Howell, C. Ray Holmes, Bennie D. Barker.

Alternates: R. L. Bridger, R. L. Smith.

Fourth District: Penn Marshall, Jr., P. C. Purvis, James H. Edwards, Harold E. Maxwell, Walter H. Finch, Jr.

Alternates: Lawrence A. Cameron, Robert H. Gainey, Jere E. Roe, Lloyd B. Stanley, Gordon L. Townsend.

Fifth District: M. W. Aldridge, T. S. Fleming, Walter S. Linville, Jr., Richard F. Hunt, Jr., Thomas B. Reid, Jr.

Alternates: James L. Cox, James A. Privette, Matthew G. Delbridge, Junius H. Rose, Jr., Richard N. Hines, Jr.

#### REFERENCE COMMITTEES

Constitution and Bylaws: Thomas G. Nisbet, Chairman; G. Shuford Abernethy, D. T. Carr, C. P. Godwin, J. Henry Ligon, Jr.

Ethics: Joseph M. Johnson, Chairman; Elliot R. Motley, C. W. Horton, C. Z. Candler, Jr., Darden J. Eure.

Rules and Order: Penn Marshall, Jr., Chairman; James H. Edwards, Walter H. Finch, Jr., Harold E. Maxwell.

Committee A: F. A. Buchanan, Chairman; W. Stewart Peery, Richard F. Hunt, Jr., James B. Howell, C. Ray Holmes.

Committee B: M. Lamar Dorton, Chairman; Maurice B. Richardson, Cecil A. Pless, Jr., M. W. Carpenter, P. C. Purvis.

Committee C: M. W. Aldridge, Chairman; William A. Mynatt, M. S. Thurston, W. Smith Kirk, T. S. Fleming.

#### 112th ANNUAL SESSION COMMITTEE

L. D. HERRING, General Chairman

Arrangements: Zeno L. Edwards, Jr., Chairman; William E. Kidd, J. Fred Sproul, Charles A. Jarrett, B. E. Kanoy, John W. Girard, Jr., William M. Heeden, Jr.

**Banquet and Reception:** C. R. VanderVoort, Chairman; M. M. Lilley, Cecil A. Pless, Jr., M. L. Cherry, Ben H. Houston, R. B. Warlick, Robert D. White, Robert W. Wentz.

Clinic: Robert H. Gainey, Chairman; Galen W. Quinn, R. F. Hunt, Jr., E. Kent Rogers, III, Fred C. Miller.

Dance: Robert W. Sugg, Chairman; J. J. Lauten, J. R. Edwards, Jr., Robert E. Finch, William G. Lee.

**Entertainment:** W. Kimball, Griffin, Entertainment Co-ordinator; Robert W. Sugg, Dance; C. R. VanderVoort, Banquet and Reception.

Exhibit: R. B. Barden, Chairman; Henry V. Murray, Jr., Scientific Exhibits; G. C. Stowe, Jr., C. E. Roberts, C. Mitchell Hatchett, Jr.

Hospitality: James E. Furr, Chairman; E. Smith Jewell, J. Ernest Roberts, Gordon L. Towsend, S. W. Shaffer, R. H. Turlington.

Monitor: C. F. Clark, Jr., Chairman; John L. Matney, Neal Sheffield, Jr., Robert W. Clinard, William G. Ware, Jr., John S. Long, Harding W. Rogers, Jr., G. R. Nantz, William F. Riddle, John B. Hardy, Jr., Richard J. Citrini, Daniel B. Harrell, Jr., Daniel J. Floyd, F. H. Culbreth, Derwood L. Ashworth, Robert H. Poole, Jr., Junius H. Rose, Jr., T. R. Oldenburg, David E. Van Vleet, Riley S. Stallings, Jr., June H. Stallings, Jr., Frank M. Ramos, Robert M. Fox.

Necrology: Robert T. Byrd, Chairman; Luther H. Butler, C. B. Johnson, New Bern, Robert A. George, Albert P. Cline.

**Program:** Baxter B. Sapp, Jr., Chairman; Pearce Roberts, Jr., J. Harry Spillman, Guy R. Willis, James L. Cox, Lloyd B. Stanley.

Publicity: Glenn F. Bitler, Chairman; J. Donald Kiser, C. T. Barker, F. A. Buchanan, H. Estes Butler.

**Sports:** William J. Wiggs, Chairman; J. A. Ward, D. Clyde Young, Jr., LeRoy K. Heath, Willard I. Herring, Arthur C. Riddle, Jr.

Visual Education: W. A. Mynatt, Chairman; Kenneth M. Ray, T. Edgar Sikes, Jr., Sandy C. Marks, Frederick G. Hasty.

#### Table Clinics

Wednesday, May 8, 9:00-11:30 a.m. Cardinal Ballroom

- 1. Porcelain Jackets for Non-vital Teeth, Robert B. Litton, Shelby.
- 2. Tongue-Thrust Corrections, John R. Thompson, Jr., Shelby.
- 3. Horizontal Pin-Splint, Robert H. Owen, Jr., Asheville.
- 4. Pin Retention in Restorative Dentistry, M. V. Massey, Brevard.
- 5. Simple Office Procedure, William S. Prevost, Jr., Waynesville.
- **6.** A New Approach to the Functional Generated Path, Robert W. Holmes, Asheville.
- 7. To be announced, Keith L. Bentley, North Wilkesboro.
- **8.** Pulpotomy and Primary Teeth, Robert M. Wilkinson and Robert W. Clinard, Winston-Salem.
- 9. Amalgam Pin Technique, Eldon H. Parks and James A. Harrell, Elkin.
- 10. Functional Generated Path, James E. Graham, Jr., Charlotte.
- 11. Use of Electrosurge, Ervin M. Funderburk, Charlotte.
- 12. Reparative-Restorative Dentistry, Baxter B. Sapp, Jr., Durham.
- 13. Emergencies in the Dental Office, J. N. Partrick, Duke Medical Center.
- 14. Topical Fluorides, T. R. Oldenburg, Chapel Hill.
- 15. A New Finish in Gold, Charles A. Reap, Jr., Chapel Hill.
- 16. Cleft Lip/Palate Treatment, Galen W. Quinn and W. D. Abbey, Durham.
- 17. Management of Impacted Cuspids, Vonnie B. Smith and Benny W. Martin, Raleigh.
- 18. Maxilla Denture Reline Technique, Norman B. Grantham, Jr., Smithfield.
- 19. Management of Dry Sockets, Frank B. McGrath, Jr., Lumberton
- 20. Two Clinics from Wayne Technical Institute, Goldsboro.
- 21. Closure of Oral Antral Fistula, W. Robert Caviness, Fayetteville.
- 22. Aid to Orthodontic Diagnosis, Jack E. Silvers, Goldsboro.
- **23.** Pin Amalgams, William E. Kidd, Washington and Junius H. Rose, Jr., Kinston, Loblolly Study Club.
- 24. Utilization of Pins in Anterior Restorations, Carle W. Mason, Jr., Wilson.
- 25. Keogh Plans, Donald L. Henson, Kinston.
- 26. Mixing Polishing Paste, N. C. Dental Hygienists Association: Mrs. Elsie Haithcock and Mrs. Jean Mann, Burlington; Mrs. Helen K. Aldridge, Mebane.

#### Scientific Exhibits

Sunday, May 5, 2:00 p.m. to Tuesday, May 7, 5:00 p.m. South and Dogwood Rooms

- 1. Cancer in the Head and Neck, American Cancer Society, North Carolina Division, Inc.
- 2. Advanced Concepts of Operative Dentistry, Armed Forces Dental Services via AFIP, U. S. Air Force, U. S. Army, U. S. Navy.
- 3. For Good Dental Health, Start Early, Dairy Council Units of North Carolina.
- **4. Use of Rotational Cineradiography,** Division of Orthodontics, Duke University Medical Center.
- 5. Dental Laboratory Technology, Durham Technical Institute.
- 6. Research Programs at the Dental Research Center, UNC, Dental Research Center, UNC School of Dentistry.
- 7. Career in Dental Assisting, North Carolina Dental Assistants Association.
- 8. Analysis of a Typical Day for a Dental Hygienist in the Dental Office, North Carolina Dental Hygienists Association.
- 9. The Dentist's Role in Cardiopulmonary Resuscitation, North Carolina Heart Association.
- 10. Score For Better Teeth, Dental Health Division, N. C. State Board of Health.
- 11. Education for Dental Auxiliary Personnel, UNC School of Dentistry.
- 12. Wayne Community College Dental Occupations, Wayne Community College.
- 13. Health Careers for North Carolina, Health Careers for Mecklenburg County.
- 14. Dental Auxiliary Education, Central Piedmont Community College.
- 15. Mitigation of Mental Retardation Through Early Care and Management of Cerebral Palsied Infants, presented by North Carolina Cerebral Palsy Hospital under a grant from the U. S. Department of Health, Education, and Welfare.

#### Commercial Exhibits

Sunday, May 5, 2:00 p.m. to 6:00 p.m.

Monday and Tuesday, May 6 and 7, 9:00 a.m. to 5:00 p.m.

**Exhibition Hall** 

You are urged to visit the commercial exhibits. These manufacturers, dealers, laboratories and other organizations will be represented by highly qualified people who can give you helpful hints on economical and intelligent buying.

Firm Name Bo	oth
Aqua Tec Corporation, Denver, Colorado	. 77
Astra Pharmaceutical Products, Inc., Worcester, Massachusetts	. 56
Bard-Parker Co., Inc., Rutherford, New Jersey	. 84
Block Drug Company, Inc., Jersey City, New Jersey	. 63
Bosworth, Harry J., Company, Chicago, Illinois	. 37
Buran Dental Laboratory, Asheville	. 25
Carolina Dental Laboratory, Raleigh	. 62
Cass, Cooper D., Company, Winston-Salem	. 87
Caulk, L. D., Company, Milford, Delaware	. 55
Charlotte Laboratory, Inc., Charlotte	. 78
Coastal Dynamics Corporation, Venice, California	. 81
Coca-Cola Bottling Company, Aberdeen	. 6
Davies, Rose-Hoyt, Needham, Massachusetts	. 33
Densco, Denver, Colorado	. 41
Den-Tal-Ez Chair Manufacturing Company, Des Moines, Iowa	. 52
Dentists' Supply Company of New York, York, Pennsylvania	30
Dri-Clave Corporation, Westbury, L. I., New York	. 68
Engelhard Industries, Baker Dental Department, Carteret, New Jersey	. 74
Getz, William, Corporation, Chicago, Illinois	. 40
General Electric Company, X-Ray Department, Milwaukee, Wisconsin	. 43
Jelenko, J. F., and Company, Inc., New Rochelle, New York	. 15
Johnson & Johnson, New Brunswick, New Jersey	. 54
Keener Dental Supply Company, Asheville	. 73
Kenton Pharmacal Company, Inc., Covington, Kentucky	. 49
Kerr Manufacturing Company, Detroit, Michigan	. 35
Lactona Products Division, Morris Plains, New Jersey	. 60
Lavoris-Vick Chemical Company, New York, New York	. 59
Life-Like Ceramics, Inc., Atlanta, Georgia	. 82
Lilly, Eli, and Company, Indianapolis, Indiana	. 88
Lochhead Laboratories, Inc., Cincinnati, Ohio	. 34
Management, Inc., Asheville	. 80
Mayrand, Inc., Greensboro.	. 65

# **Commercial Exhibits**

Medical-Dental-Hospital Bureau of N. C., Inc., Durham			76
Merrill, Wm. S., Cincinnati, Ohio			66
Midwest American, Melrose Park, Illinois	1	2 &	13
National Dental Supply Company, Abington, Pennsylvania			83
Ney, J. M., Company, Hartford, Connecticut			64
Noble Dental Laboratory, Raleigh			69
North American Philips Company, Inc., New York, New York			
Olney's, Greensboro			. 44
Oral B Company, Wayne, New Jersey			
Pedodontic Service, Inc., Charlotte			
Pelton & Crane Company, Charlotte			
Powers & Anderson Dental Company, Inc., Charlotte			
Premier Dental Products Company, Philadelphia, Pennsylvania			
Procter & Gamble Distributing Company, Cincinnati, Ohio			
Professional Budget Plan, Madison, Wisconsin			
Raleigh Dental Laboratory, Raleigh			
Richmond Dental Cotton Company, Charlotte			
Ritter Equipment Company, Inc., Rochester, New York			. 90
Robins, A. H., Company, Richmond, Virginia			. 75
Rocky Mountain Dental Products Company, Denver, Colorado			
Rothstein Dental Laboratories, Inc., Silver Spring, Maryland			. 57
Saunders, W. B., Company, Philadelphia, Pennsylvania			
Smith, Paul K., and Associates, Decatur Georgia			
Surgident, Ltd., Los Angeles, California			
Sturgis, J. Minor, Porcelain Laboratory, Atlanta, Georgia			
Sullivan Laboratories, Washington, D. C			
Sutton, G. W., and Company, Washington, D. C.			
Thompson Dental Company, Greensboro			
3M Company, Dental Products, St. Paul, Minnesota			
Tincher Dental Laboratory, Charleston, West Virginia			
Union Broach Company, Inc., Long Island City, New York			
Unitek Corporation, Monrovia, California			
Universal Dental Company, Philadelphia, Pennsylvania			
Walker-Sizer Dental Company, Raleigh1			
Weber Dental Manufacturing Company, Canton, Ohio			
Westlund Dental Studio, Inc., Minneapolis, Minnesota			. 31
White, S. S., Company, Philadelphia, Pennsylvania			
White, S. S., Company, X-Ray Division, Great Neck, New York			. 22
Whitehall Laboratories, New York, New York			
Wilkie's Dental Laboratories, Burlington			
Williams Gold Refining Company, Inc., Buffalo, New York			
Woodward Prosthetic Company, Greensboro			

#### THE CAROLINA

PINEHURST, N. C.

#### WINTER GOLF CAPITAL



DURING THE SOCIAL SEASON AND FOR CONVENTIONS TOO—YOU ARE ALWAYS WELCOME

FOR TOURIST, AND TRAVELER ON VACATION — IT'S ALWAYS GOLF-TIME IN PINEHURST

IDEALLY SITUATED IN THE PINE COUNTRY
OF THE CAROLINA SANDHILLS

DANIEL O. DELANY, MANAGER KYLE W. FLEMING, JR., SALES MANAGER

### NORTH CAROLINA DENTAL ASSISTANTS ASSOCIATION

#### EIGHTEENTH ANNUAL SESSION

# WHISPERING PINES MOTOR LODGE, SOUTHERN PINES MAY 4-7, 1968

#### **PROGRAM**

Saturda	y, May 4				
3:00 Sunday	RegistrationLobby				
10:00	First Session of General Assembly Ballroom				
1:00					
2:00	General Session				
	Response: Mrs. Jackie Patillo, Vice President, N.C.D.A.A.				
	Report of Fourth District Trustee: Mrs. Janelle Butler,				
	Cayce, S. C.				
	"Operation—68," Mrs. Moselle Comer, President, A.D.A.A.,				
	Norfolk, Va.				
	"Communications: Did Anyone Understand? Did Anyone				
	Listen?" Mr. Willmore B. Hastings, Central Piedcont Community College, Charlotte				
	President's Address: Mrs. Shelby Brown, Raleigh				
8:00	Reception				
Monda	y, May 6				
	· · · · · · · · · · · · · · · · · · ·				
	9:00 Second Session of General Assembly				
10:30	Educational Forum Ballroom Welcome: Mrs. Shelby Brown, President				
	Program Chairman: Miss Joyce Sigmon				
	"Dental Public Health Programs in North Carolina," Dr. E. A.				
	Pearson, Jr., Director, Dental Health Division, N. C. State				
	Board of Health, Raleigh				
	"Dental Auxiliaries Today and Tomorrow," Dr. Freeman C. Slaughter, member, North Carolina State Board of Dental				
	Examiners, Kannapolis				
	"The Challenge in Dental Assistant Education for the Future,"				
	Dr. James W. Bawden, Dean, School of Dentistry, University				
	of North Carolina, Chapel Hill				
2:00	Table Clinics Ballroom				
7:00	Banquet Ballroom				
9:00	Toastmaster: Dr. Bob C. Raynor, Garner  Dance honoring President Shelby BrownBallroom				
	·				
1 uesda	<u>y, May 7</u>				
10:00	Third Session of General Assembly Ballroom				
12:00	Installation Luncheon Ballroom				
1:30	Board of DirectorsBallroom				



Mrs. L. P. Megginson, Jr. President-Elect



Mrs. T. Hicks Hamrick, Jr. Vice President



Mrs. John R. Lore Treasurer



Mrs. David H. Freshwater President

# NORTH CAROLINA DENTAL AUXILIARY OFFICERS

1967-1968





Mrs. Charles T. Barker Recording Secretary



Mrs. Frederick G. Hosty Historian



Mrs. Fred H. Miller Corresponding Secretary

#### NORTH CAROLINA DENTAL AUXILIARY

#### EIGHTEENTH ANNUAL MEETING

#### THE CAROLINA, PINEHURST

MAY 5-8, 1968

#### **PROGRAM**

Sunday	v, May 5				
1:30	Registration Desk Opens	Hotel Foyer			
5:30	Lawn PartyFront Lawn				
8:30 North Carolina Dental Society General Session					
		Cardinal Ballroom			
	(Auxiliary members invited to atter	nd)			
Monda	ny, May 6				
8:30	Golf and Tennis Breakfast	Dining Room			
	(Followed by Tournaments at Pineh				
3:00	Executive Board Meeting	Azalea Room			
4:00	Past Presidents' Meeting	Azalea Room			
8:30	Annual Business Meeting	Azalea Room			
9:00	Bridge Party	Azalea Room			
Tuesda	ny, May 7				
12:30	Luncheon-Fashion Show	Dining Room			
	(Honoring new members, wives of special guests)	senior dental students and			
3:20					
		Cardinal Ballroom			
	Dr. John N. Ott, Sarasota, Florida				
4:30	New and Old Executive Board Meeting	_			
7:00	On Annual Banquet, North Carolina Dental SocietyDining Room				
9:00	Dance and Entertainment	Cardinal Ballroom			

#### Wednesday, May 8

Check-Out after lunch

#### NORTH CAROLINA DENTAL HYGIENISTS ASSOCIATION

# TWENTY-FIRST ANNUAL MEETING MID PINES CLUB, SOUTHERN PINES MAY 5-7, 1968

#### **PROGRAM**

Sunday	, May 5						
2:30 5:30	Executive Council Meeting (Open to Members)  Official Reception, Members and their guests and N.C.D.S. Members and their wives						
7:00	Dinner						
8:00	0 Alumnae Meetings						
Monda	y, May 6						
9:00	Registration and Coffee						
	Brownson Memorial Presbyterian Church, Southern Pines						
9:30	Opening Session Presbyterian Church						
	Presiding: Mrs. Carolyn Cole Williams, President						
	Greetings: Dr. George F. Kirkland, Jr., President, N.C.D.S.						
	Dr. M. W. Carpenter, Advisor, N.C.D.S.						
	Speaker: "Expanded Duties of the N. C. Dental Hygienists,"						
	Dr. William D. Strickland, UNC School of Dentistry, Chapel						
	Hill						
	Keynote Address: "A Team Approach to Mandibular Prog- nathism," Dr. Marvin E. Chapin, UNC School of Dentistry, Chapel Hill						
12:30	President's Luncheon Mid Pines Club						
	Toastmistress: Mrs. Gail H. McLean, Vice President						
	Speaker: Dr. Joseph D. Stewart, Winston-Salem						
2:00	Business Session						
3:45	District Caucus Meetings						
8:00							
Tuesda	y, May 7						
9:30	Second Session						
	Speaker: "Post-Chest Cardiac Massage and Mouth to Mouth						
	Resuscitation,"						
	Dr. W. Joseph Porter, Charlotte						
11:00	Business Session						
12:00	Executive Council Meeting						
3.20	The Influence of Light on Plants and Environmental Health						

Dr. John N. Ott, Sarasota, Florida

Adjournment

5:00

The Carolina

# News briefs from . . . North Carolina Dental Hygienists' Association



#### **First District**

During National Children's Dental Health Week, First District dental hygienists worked in close cooperation with the Dental Society. Among the activities participated in by the group were:

- 1. Dental Health Week posters were placed in 50-55 schools throughout the city and county, and in other public places.
- 2. Local motels recognized Children's Dental Health Week on their outdoor marquees.
- 3. With financial help from the local dental society and the local dental auxiliary, dental care kits containing toothbrushes, toothpaste, sugarless gum, and toys were prepared for some 175 children at Eliada Home and Presbyterian Home for Children. Two hygienists went to each place to give home care instruction and to show a film on dental health. Representatives of the Dental Society delivered similar kits to the Pediatric Wards at St. Josephs' and Memorial Mission Hospitals.
- 4. Ten electric toothbrushes for the ten wards at the Asheville Orthopedic Hospital were presented for the Dental Society by two dentists and two dental hygienists. Instruction in the proper use of the

toothbrushes was given to the nurses and children.

5. The local paper ran several feature articles. One local radio station had a ten minute interview with the Chairman of the Committee. Another radio station ran ADA 20-second spot announcements several times a day during the week. Three area TV stations gave announcements denoting Dental Health Week.

The Burke County Board of Public Health sponsored a clinic for third grade public school teachers and student public health nurses at Hillcrest School, Morganton. Dental health needs were discussed and instructions were given in proper home care. The purpose of the program was to launch a unit of dental health care in the school system.

#### **Second District**

The Second District met in Charlotte on January 30 to hear a discussion on "Filing Income Tax Returns" by Frank Norris of H. R. Black and Company.

Dental hygiene students at Central Piedmont Community College made posters on dental health. The posters were on display in the Cotswold and Charlottetown Malls dur-

ing National Children's Dental Health Week.

Plans are being made for the March meeting, and the annual tea for graduating hygienists at Central Piedmont Community College in April, when the Second District hygienists will present an award to the "Outstanding Student" in the class, chosen by her classmates.

#### Third District

The Durham - Orange County Dental Hygiene Study Club has held two organizational meetings. In January the first scientific program was presented by Dr. W. D. Strickland of Chapel Hill, who spoke on "Polishing Metallic Restorations." The next meeting will include a presentation by Dr. Walter T. McFall, Jr.

#### Fourth District

An organizational meeting was held in December when definite plans for the Fourth District were made.

Dr. Burton A. Horwitz, Raleigh pedodontist, spoke to the Fourth District on "Child Management" at a dinner meeting in Raleigh.

The Committee on Dental Health Week arranged for posters to be placed in Cameron Village, North Hills Mall and downtown in Raleigh. Several slides were prepared on the different aspects of dental hygiene and were shown on the Bette Elliott Show on WRAL-TV. These will be available for use by the State Association.

#### Fifth District

The Fifth District met October 22 in Goldsboro, with eleven mem-

bers present. A reception for the new members who had just passed the State Board followed the business meeting. The following officers were elected: President, Nancy Jo Traylor; Vice President, Charlotte Berry; and Secretary-Treasurer, Cleta Coward.

Mrs. Carolyn Williams, NCDHA President was a special guest.

Mrs. Charlotte Berry, Chairman of Children's Dental Health Week. carried out a very extensive program in Wayne County. The project was made possible by the financial and moral support of the Wayne County Dental Society. All third grades in the city and county schools were visited during the week by the dental hgyiene and dental assisting students from Wayne Community College. A poster contest for the 7th, 8th, and 9th grades and an essay contest for the 5th and 6th grades were held. Window displays were placed in several of the local department stores.

The next meeting will be held in May at Pinehurst.

The Fifth District is planning a table clinic for the Fifth District Dental Society meeting in September.

The Southeastern Dental Hygienist Study Club had a pot luck supper and Christmas party in Goldsboro during December. In January the club met in Greenville when Dr. M. W. Aldridge spoke on "Home Care Instruction in the Periodontal Practice," and in February they toured the dental facilities at Caswell Training Center in Kinston. Dr. James A. Privette will speak to the group in April on "Extended Duties of the Dental Hygienist." The club will meet at Pinehurst in May.

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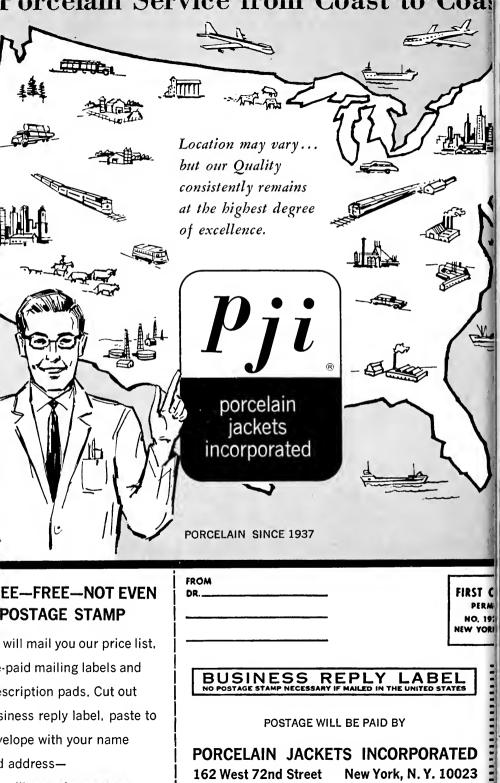




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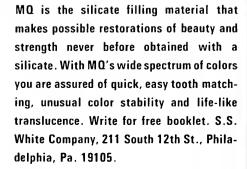
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References: 1. Hiatt, W. Local anesthesia; history; potential toxicity; clinical investigation of mepivacaine. Dent. Clin. North America p. 243 July 1961. 2. Ross, N.M. and Dobbs, E.C. Mepivacaine HCI (Carbocaine). J. Oral Surg. Anes. & Hosp. D. Serv. 21:215, May 1963.

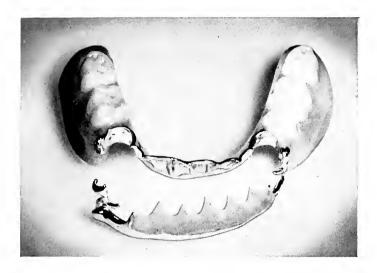
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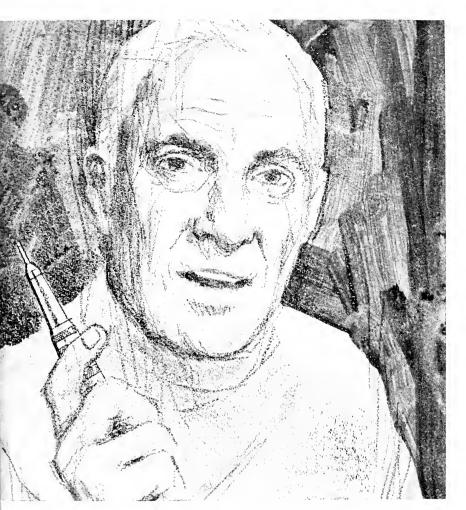
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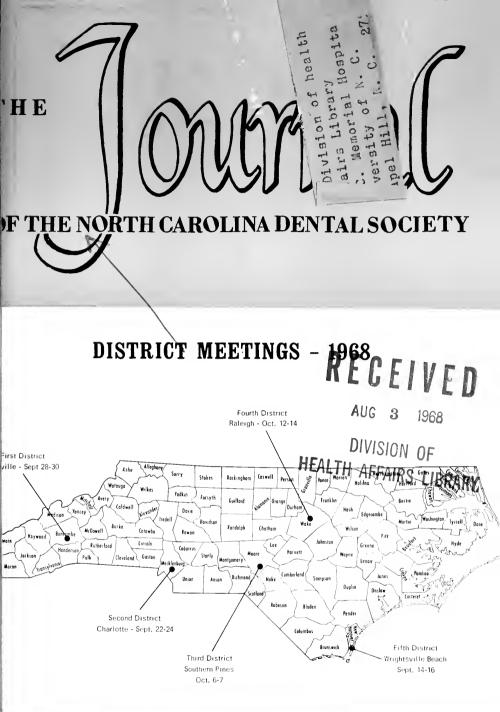
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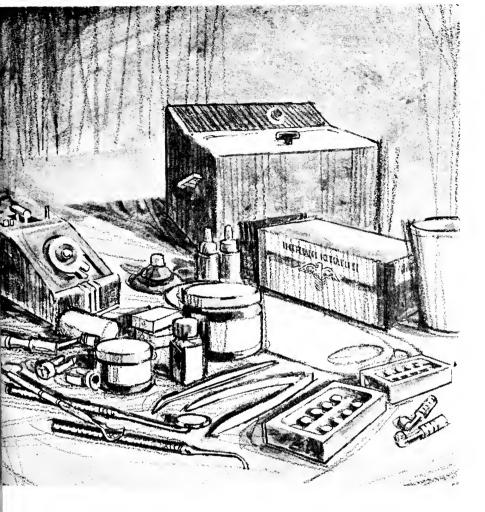
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## In grateful appreciation this issue is

dedicated to ...



Erbie M. Medlin, DDS, FACD Aberdeen, North Carolina

Dr. Medlin attended the University of Richmond, and graduated from the Medical College of Virginia in 1922. He interned one year at Morganton, North Carolina. He has been in general practice in Aberdeen since 1923.

He has served his community as commissioner and mayor, and during this administration the town water supply was fluoridated. He is a deacon in the First Baptist Church and teaches the Dr. Medlin Bible Class. A past president of the Sandhills Kiwanis Club, he is currently president of Aberdeen Savings and Loan and Moore County Educational Foundation; vice president of Moore Memorial Hospital Board; and dental member of Moore County Board of Health. In 1930 he built the first dental bungation of the State.

Dr. Medlin, a past president of the Third District Dental Society, has served the State Society as vice president, secretary-treasurer, and president. He served two terms on the State Board of Dental Examiners, two years as its president. He is a Director of the Dental Foundation of North Carolina, Inc., a delegate to the American Dental Association and was recently named chairman of the North Carolina Delegation.

Looking at this record of offices and service, one is aware of the time the work, and the dedication that each represents. We are mindful of and grateful once again that such men as this direct their efforts and give of themselves through the dental profession.



# The President's Page

FOR SOME YEARS NOW it has been my privilege to work with committee members of the North Carolina Dental Society. In some instances I have had the pleasure of serving as chairman. All of these areas of service have helped me realize how important committee structure is to the vitality of our Society. You have further honored me by electing me as your president. I know this will mean much to me in the years ahead and I thank you for another opportunity to serve you.

We owe a debt of gratitude to the men who have given so much of themselves to this position in the past. There are a number of great men who worked tirelessly to see that our Society attained great stature. This is evident by the wonderful opportunities open to many of us today. In our haste to gain more goals, let's not lose sight of the foundations on

which we build.

Appointments to committees have been made and the chairmen selected for each one. I ask that you give these men your unbiased help as they strive to place difficult decisions in the right order. Every member of the Society has a right and obligation to serve as though he were given a specific assignment, and I so charge each of you.

The theme for next year's annual session will be Better Dentistry for Better Educated Dentists. Dr. J. Harry Spillman and his Program Committee have selected outstanding clinicians. Dr. Ralph Phillips, Dr. William Dolan and our own Dr. Galen Quinn will round out a program of real merit. You would be wise to set aside the dates of May 11-14, 1969,

now so there will not be a slip-up next spring.

Let me encourage all members to see that his dental hygienist and assistant and laboratory technician are issued invitations to be present at the District Meetings this fall. These personnel are your hopes for better, nore productive dentistry in the future. They must become better informed and take advantage of all educational opportunities. By this method we will give them a foundation on which they can accept additional, lelegated responsibilities.

As I bring this to a close it is fitting that once more I thank you for this honor. As your president I pledge my untiring efforts to see that the pest interests of North Carolina dentists are kept uppermost in my mind.

COLIN P. OSBORNE, JR.

## **Editorials**

#### IT COULD HAPPEN TO YOU

- 1. You have treated four children under one of the federally supported dental programs.
- 2. Records are completed and a bill for \$140.00 submitted to the local school board who administered the program.
- 3. Vast discrepancies were supposedly found in the billing and records submitted by the participating dentists.
- 4. The school board requested help from the State Dental Society and the president of the State Dental Society appointed a committee of six dentists to examine the records. Approximately 500 patients were examined by this committee.
- 5. There was no way for this committee to know which dentist treated any child.
- 6. Of your four patients' records, two were determined to be in error by the six man committee on their cursory examination. This information was given to the press by the Board of Education before the records were further examined to determine if the examining committee was in error.
- 7. The first you knew you were involved was by telegram to appear before the Superintendent of Educa-

tion, administrator of the program.

- 8. The dental examining committee's errors were easily pointed out. One child had twelve surfaces restored and was billed for eleven. The cavity detecting X rays alone showed 7. Committee members visually examined this child at the same time the X rays were taken and, their visual examination, from charted 11 surfaces. The only question on this patient was the number of surfaces done. You were accused of charging for twelve surfaces and doing only seven. But by the committee's own visual examination 11 surfaces were charted. By your submitted charting and records, you showed twelve surfaces completed but charged for eleven.
- 9. On the second patient in question the charge was saying that treatment was completed when the committee's examination showed the child needed additional dentistry. Actually, the left side was completed and no dentistry was performed on the right side. Your bill stated "treatment completed one side only."
- 10. To defend yourself of these charges, upon the recommendation of the school board, you have both

patients in question examined in your office by two members of the examining committee, one being chairman of the examining committee. Further radiographs and photographs were taken of these patients' oral cavities.

11. These examinations and records showed that the dentistry performed and the bills submitted were accurate and proper; therefore, the charges were invalid. You submitted this to the State Board of Dental Examiners without being requested.

12. You submit a letter to the Board of Education donating your services to the program rather than become further involved in this controversy.

13. After this your name appeared in the news media as being one of those accused of discrepancy

on your part in this dental program. It has continued to appear in this "light" for over a year. When other dentists were brought before the State Board of Dental Examiners, the news media again mentioned your name as being cleared by the State Board of Dental Examiners.

14. Actually, you were never indicted by the State Board of Dental Examiners. Therefore, they had no jurisdiction to clear you, and did not do so. You tell your story to the newspaper and they printed a nice story entitled "His Nightmare Finally Ends."

—There are those elected to prosecute the guilty but who protects the innocent?

Is it not the Board's and Society's duty to protect the innocent? This Could Happen to You. It Happened to John Reynolds.

## **Guest Editorial**

#### WHOSE AMERICAN DENTAL ASSOCIATION IS IT?

Reprinted from the "Bulletin" Columbus Dental Society (Ohio), November, 1967 by permission of the author and the Society.

"During the events which prereded the Columbus Dental Society's recent action to oppose the forthcoming dues increase resolution of he ADA's Board of Trustees, it became apparent that some members had not acquainted themselves with he issues at stake and therefore lid not speak out. Similarly, at the DDA House of Delegates many lelegates voted on issues they did not fully understand. Upon request for further enlightenment and reconsideration, a number of them reversed their original vote so that more appropriate action was taken.

"All of us have the responsibility of being thoroughly knowledgeable about the issues confronting us before we take a position on them."

WM. E. ASHLEMAN

## Whose American Dental Association Is It?

I wish to discuss some interesting facets of one of the issues recently acted on by the society. They are the fiscal structure and policies of our ADA in relation to the proposed dues increase. These facets are designated by the titles the trustees used in "Supplement One to Reports of Officers and Councils 1967 ADA" and abbreviated in the ADA News Letter supplement, 5 Sept. 1967.

#### "The Rising Cost of Goods and Services"

There can be little argument about our need to match today's inflationary demands, but to include a proposal that advertising may be taxed by the I.R.S. is only conjecture and not reality.

#### "Expansion of Program"

We all want to expand worthy programs but does the "full utilization of the research laboratory complex in the headquarters building" justify a dues increase? Has the ADA explored other avenues of funds for research?

Has the ADA considered establishing a non-profit ADA research foundation which might utilize otherwise taxable income as, for example, the Battelle Memorial Institute in Columbus does?

Has the ADA considered assigning ownership of the headquarters building to such a foundation on a lease-back agreement to avoid income from rental to others?

#### "Relation of Membership to Total Income"

The Trustees inform us that "At present only 51 per cent of total

income is received from membership dues." Our trustee, Dr. Keith Devoe, has informed us that the break-point for income from membership dues versus non-related income is 50 per cent to retain our non-profit, non-taxable status.

Income as herewith stated is gross income and does not mean profit. Nowhere does the word profit enter this picture! Therefore, one must realize that each \$1.00 of non-related income must be matched by \$1.00 of membership dues. We must therefore recognize these facts:

- •For each dollar a dentist spends for ADA appointment books, pamphlets, teaching materials and publications, there must be a dollar matched from dues.
- For every dollar of advertising income in the JADA, (15 per cent of ADA gross income), we must match equal dues dollars.
- For each dollar of rent paid to the headquarters building by nonrelated renters, we must submit a dollar of dues.
- For each exhibit rental dollar the members must match an equal sum.

Therefore, I challenge you, is it not illogical to purchase materials and publications from the ADA if we penalize our members for doing so?

Is it wise to accept and/or increase the rentals of the headquarters building, advertising, exhibitor fees and other types of non-related income if we must increase the membership dues by an equal amount?

Is it not possible for the ADA to establish a press, such as a private, non-profit, university press, to issue all books, literature, teaching aids and publications for members of the ADA and the public? Such a

press is not a printing plant but is the distributing organization for its commercially printed matter and other items.

### "Expenditure Per Member"

The Trustees state, "Each active and life member now benefits from the expenditure of \$70.00 per member annually while active members pay only \$40.00 in dues. This balance should be redressed to the point at which active members will be paying dues more closely related to benefits received."

Don't hang your head in shame for this implied charity you have received. The trustees have failed to point out that the \$30.00 difference is derived from the 49 per cent of non-related income.

### "Non-Dues Income"

The Trustees are quite right in stating that the expansion on non-dues income from the ADA's profit-making activities in competition with comparable commercial operations must be curtailed.

Should this curtailment not take place before a dues increase becomes necessary to match these profit-making operations?

### "Reserve Division of General Fund"

The trustees state, "The reserve reached its peak in 1962 with a portfolio of \$3,055,000 at cost and \$4,291,000 at market value and was utilized in major part in the (headquarters building) construction program." and "No contributions have been made for the past three years which now contains somewhat less than one million dolars, at market."

The audit of the ADA as of 31 December 1966 showed Reserve Division Funds of \$10,211.59 cash and \$720,285.20 Investments at cost with a market value of \$911,911.60. The audit also notes that the General Fund, Operating Division has a surplus of \$56,596.00 for the year 1966.

Therefore, since the reserve was depleted by \$3,000,000 plus for the headquarters building, and since no other major depletions are in sight, is a dues increase necessary to increase a reserve of slightly under \$1,000,000?

## "Amortization of Mortgage Loan"

The trustees tell us that prepayment of the mortgage will produce substantial savings and that if the ADA is full owner of the building six years after construction, the exposure to federal non-related business income tax would be entirely eliminated.

It has been the understanding of many members that the headquarters building was to be selfsupporting and that there would never be an increase in dues to support this commitment. Is this holding true?

Investment counselors indicate that we have prime loans in these times of inflation. The mortgages are for twenty years and break down as follows:

A. \$2,000,000 at 41/4 per cent

B. \$4,500,000 at 5 per cent

C. \$1,000,000 at 5½ per cent

With these fixed mortgages, fixed payments and pre-payment penalties, are we wise to pay them off early?

With the ever-increasing numbers of dentists graduating from our

universities, the ADA will have unprecedented growth and income. With this future, is it good business acumen to pay off this noninflationary obligation now?

If the headquarters building has now become a burden, why not consider transferring ownership to an ADA foundation, as previously suggested, or to the ADA Relief Fund? Since the latter is a non-taxable trust fund, could it not use the building for investment income? This fund now owns stocks and bonds to increase the trust for our distressed.

The ODA House of Delegates was told that, if the resolution proposed by the ADA Trustees should pass in 1968, "It is believed that such an increase in dues will seriously restrict the local society and other components from increasing their own dues to successfully operate their programs at the local level.

"Such an increase would further make it more difficult to recruit members, especially younger men, and hence these members would be lost to both state and national organization."\* As suggested there must be better approaches than a dues increase to improve the fiscal status of the ADA. Dues and taxes are alike in that they seldom are reduced.

Whose ADA is it? It is yours and mine. Let's not permit it to develop a "Big Brother Syndrome" for lack of grass roots action.
WILLIAM E. ASHLEMAN, president

\* Resolution 32-67 House of Delegates — OSDA 1967

### **Book Review**

Periodontics for the Dental Hygienist. By Grover C. Hunter, Don L. Allen, and Walter T. McFall, Jr., Lea and Febiger, Philadelphia, 1968.

This volume introduces the hygienist to the study of periodontics, the anatomy and physiology of the periodontium, periodontal pathology, and the etiology of periodontal disease. At the conclusion of the book, the authors present two illustrated chapters on prophylactic instrumentation and oral physiotherapy as it should be performed by the practicing hygienist.

## Program for '68

by Colin P. Osborne, Jr., DDS

Officers and members of the District Officers Conference, honored guests, ladies and gentlemen: It gives me great pleasure to appear before you on this special occasion. For some years now, it has been my privilege to be a part of this fine group. The establishment of the District Officers Conference marked another progressive step in the history of the North Carolina Dental Society.

It is my intent this morning to tell you the items that are of interest to me. Some of these are more necessary than others, and you will judge the merit of each. At the same time, please allow me time to express my concern for what each member can do in their behalf. Many of you are aware of a change in the complexion of today's dental needs, and patient load in the of-

fices of North Carolina dentists. Unfortunately, there are too many of our friends who conscientiously practice only within the four walls of their offices. This means they neither see the broader involvement that is already upon us, nor conceive the great calamity just ahead. Those are the men who most need what we already know.

### **Improved Communication**

Communication is the key to answers we so desperately seek. Therefore, I would like to see the North Carolina Dental Society install a WIDE AREA Telephone Service in the Central Office which would be open to all members across the state. The cost of this installation could be an item that would become an asset.

Letter writing today is no longer a luxury. It requires many man

<sup>\*</sup> Presented by Dr. Osborne, then president-elect, and now president, at the District Officers Conference Breakfast in Pinehurst, May 6, 1968.

hours of lost time in the modern dental office that can never be regained. Patients that would receive proper care do not get needed appointments. Dictated letters are so costly that few can justify the expense, hence, the widespread use of electronic equipment. Even this method is not entirely satisfactory.

Each letter requires an answer for seldom is the content interpreted in the same manner in which it was penned. Valuable time is lost in transit while a desperate situation waits for a reply. Even receipt of the letter is likely to raise another barrier not previously covered in the last correspondence.

Telephone conversation is second to actual face-to-face discussion, and only then because facial expressions are not observed. This is the most successful way parties can settle plans from long range; meaning we should be able to conduct Society business without numerous meetings in our Central Office or other parts of the state. This ought to be attractive to most of you men seated with me this morning for you generously donate your time and effort to promote a strong dental organization.

#### **Questionnaires**

A second request of mine would be to encourage active participation in questionnaires mailed to your offices. There are times when these are burdensome, but we find busy people generally provide the most accurate information. Sampling resumés are taken occasionally and some of you will be contacted. Give the inquiring party your moment of service so results will be as nearly complete as this method can provide.

Even with this admonition, we

are likely to find errors creeping into facts and figures. The Employment Security Commission last year took time to get a sampling of our auxiliary needs that are compiled in this booklet I hold in my hand. With all the knowledge at their command and experience gained through the years, there are numerous errors.

One of the most glaring is that five of our dentists have hygienists they are training on-the-job. Rather, they are listed as on-the-job trainees, and it may be that an eagerbeaver is training all five. Seriously, we know this is an error!

The point I wish to make is our statistics are made from the answers give. A responsible promptly given brings much on which to base future plans your success. Our legislature will use these facts and figures as a basis for planning dental needs during sub-committee meetings. Already the Dental Advisory Committee has prepared a statement to be mailed to members of such groups concerned with these statistics. Even though they will be informed of known errors, there is danger that the strength of this report will be a real factor in final deliberations.

#### **More Trained Auxiliaries**

Dentistry has become a professional service of more than filling and pulling teeth. We are on the threshold of an exciting area in the history of our wonderful heritage. One facet of fast developing change is the use of more auxiliaries trained in acceptable schools across the state. They come to us with good background education, and an ability to act in our behalf. No longer do we have to face the prospects of weeding out undesirable

or dismissing incompetent girls after two or three months unsatisfactory service.

As Chairman of the State Advisory Committee for Educating Dental Auxiliary Personnel for two years, I can state we are able to look into the future with great anticipation. These programs are under the control of the Community College System of Education. There are fine schools that include programs of interest to you:

Wayne Community College at Goldsboro: Dental Hygiene and

Dental Assistant Programs.

Durham Technical Institute at Durham: Dental Laboratory Technician Program.

Technical Institute of Alamance at Burlington: Dental Assistant Program, the oldest in the state.

Guilford Technical Institute at Jamestown: A Dental Hygiene Prospension of the Manpower Development Training Act, will be under the control of the Community College System beginning in September, 1968. A Dental Assistant Program, the last under MDTA is a currently in progress.

Central Piedmont Community College at Charlotte: Very successful Dental Hygiene and Dental Assistant Programs.

All of these programs are on good, solid footing that will provide nany more auxiliary personnel in he future. Most schools are limiting class size on purpose so that accurate curriculae can properly handle tudent problems. This means we an expect qualified girls and men hat capably perform chosen tasks or assigned duties.

All schools are threatened by the nbelievable shortage of qualified eaching and administrative staff.

There is no reservoir of personnel to draw upon and the critical shortage has caused programs to limp along on these facts. We must provide answers to relieve this cramping situation.

Fortunately, the School of Dentistry at Chapel Hill is opening its doors to this challenge and will attract girls that can be trained. A baccalaureate degree in dental hygiene will be offered in two ways: First, a girl who has her hygiene degree can return for a two year course in education to prepare her for teaching. Second, the youngster who already has two years of education and would like to get her dental hygiene degree. Thus, our problem is being attacked from both directions—education and a specialty.

The recruitment of qualified applicants is still one of our most difficult assignments. Many of you could supply names and the initiative needed to send these youngsters into these programs. As her dentist, you should help steer some of these into one of the programs. This would help you get back an appreciative worker who would share your interest. I do not need to elaborate on what this means to a dental practice.

### **Expanded Use of Auxiliaries**

As we move into areas of expanded use of dental auxiliaries, the responsibility placed in the hands of our State Board of Dental Examiners is going to be monumental. There is no way at this time that we can determine exactly how it will be discharged. All of us are aware of the role this board occupies as a state agency. Therefore, the recommendation I would make can only be a suggestion.

It seems to me that an increase in the fee to renew our state license is more real than imaginary. Already, we have lost one member of the board and it is in reality a fiveman team. The secretary is overwhelmed with burdensome correspondence and menial tasks. He should be able to employ an executive secretary who would take much of the nonspecific correspondence, questions and answers from his actual manipulation.

If this is to be a State Board of Dentistry and fulfill requirements beyond examining numerous applicants for license, they will need more time for these duties. A well qualified, confidential secretary can add much to the stature this group has already attained. Too, she would enable the president of the Board to spend less time on correspondence and searching for items needed for specific requirements. This would give him extra time to devote to the actual needs of our profession.

Additionally, we need to acknowledge that most dentists are honorable, dedicated practitioners. Their keen interest in the welfare of each patient is evidenced by the role the dentist takes in the community in which he practices. Doubtless he enjoys honors and recognition given to few other allied professional people.

What is true must be recognized as we move into expanding our dental auxiliaries. By permitting more procedures to be done legally by the auxiliary, the dentist can be relieved of burdensome, ordinary and usual procedures. Each man must become responsible for the total treatment of patients in his office. The proper use of these auxiliaries will be ac-

cording to the judgment, direction and discretion of a dentist.

It is conceivable that the dentist is but one clinician in the overall care of each patient. His role as surgeon of hard and soft tissue is more of a reality than most of us realize. By delegating more routine tasks to qualified, formally trained personnel, the dentist could devote more time to services he alone can give.

Our patients are accustomed to this plan and only in a dental office does the doctor do all the menial tasks. Our medical colleagues years ago gave up these to assistants trained in varying degrees and would find it impossible to care for patients as did the physician during horse and buggy days. We dentists need to take a hard look at what the future problems are going to be, and adjust our sights accordingly.

If we accept these comments as fact, then it follows we would need to consider the overall effect on your practices if all personnel were salaried. The expanding of duties for dental assistants will automatically create discrepancies within the procedures done and salaries paid. This control of income for all personnel would provide the means for quality dentistry rather than quanity production. A functioning team would develop which has the added advantage of enhancing total patient care.

It is vitally important that existing schools train dental hygienists, assistants, and laboratory technicians. Other schools should be in the planning stage so they may be started when competent faculty and staff are available, and the need develops. So far, the Community College System still provides the best

route based on its grass roots location in each part of our state.

You should be proud that North Carolina educators have taken such an active interest in our dental programs. These programs command admiration on all campuses. Encourage the instructors dedicated to the job at hand with your visits to the classrooms.

### **Continuing Education**

Continuing education for the dentist has never been more necessary than in this time of rapid revisions in accepted technics and ideas. Every class graduating from our dental schools has newer ideas and improved methods for treating their patients. We ought to enforce our Code of Ethics. Section 1, and see that each practicing dentist has recently taken time to improve himself. This could be in many areas of dentistry and according to studies made by the Council on Dental Education of the American Dental Association. Dental meetings, short postgraduate study courses, and a variety of correspondence courses are but a few of those accepted by this group.

### A Strong Voice for Dentistry

We must look to the North Carolina Dental Society for guidance and direction; too long it has followed rather than led our state's dentists. We need a strong voice to speak out against federal, state, and local agencies with their dental programs implemented by lay people and government agents. It is time the Executive Committee receive guidance from our House of Delegates in order to give Society members purpose and direction. We must have a spokesman in the State Legisla-

ture for dentistry during the months when the general meeting is no longer in session.

Mounting pressure from the government for socialistic changes and reluctance from the subsequent patient to accept recommended proceand costly rehabilitation catches, the dentist is in an inescapable vise. Many people with severe dental needs are not receiving adequate professional care because of financial hardships or lack of adequate dental education. Governmental agencies are already established which could move into these areas and provide needed attention on a "give away" basis - paid for by your tax dollar. Surely, the better way would be for the North Carolina Dental Society to seek some method of supplementing a young dentist or a dentist retiring from military or other service. This procedure would give professional control of a desperate situation that is likely to get disproportionate recognition by other means.

There is a possibility that young men who receive state help for loan funds could be encouraged to use these areas for discharging their responsibility. Certainly, it is better than going to West Winston-Salem or East Charlotte because these cities fit the 5,000 people or less criteria set down in original requirements by state lending agencies. If enough professional people were to move into these areas of need by this means it would provide a healthy atmosphere. A happy situation could develop which would make it attractive enough for the participating man to remain long after his original obligation had been discharged. Family life would be more oriented to that which the

young professional men are accustomed with an upgrading of the community activities.

### **Increased Services Require Money**

If you are to receive the best results from the North Carolina Dental Society, you must be prepared to support these requests. During this talk. I have outlined some ideas that will help us get this direction. The unfortunate fact is that these proposals cost money. We must realwhat a bargain our dental association is, and speak up for what it has done and can do in the future. A dues increase is one item that should be considered before leaving Pinehurst. Some of the items that make this a reality are found in added services that you will expect and demand in the immediate years ahead. Each member of this great organization has every right to consider his request on a personal basis for he alone knows what drives him to seek this aid. Because reluctance on our part in years past has often delayed a real request, some members have expressed a strong desire to no longer be a part of the North Carolina Dental Society. Real or imagined as these slights may be, they only point up added requests we can logically expect as more men seek information from our Central Office and the officers of our Society.

With the increase of dental-legal suits in our courts, we must maintain a reserve of decisions which will be available to each member. Although competent legal help is the only route to any courthouse door, it is understandable that we should act in any member's behalf whenever possible.

Agencies created without the di-

rect supervision of recognized dental authority are gaining in numbers each year. There are many programs over which we have no real voice or control already affecting our patient load. You can see the implication this has on those who would get into the stream with those already wet and successful. We need a reserve to stand our ground in the face of undesirable circumstances that change our lives or make it more difficult to render desirable patient care. Because of mounting pressures on your lives from so many directions, we must be in a position to resist without fumbling the results. We can help our members most by making it possible for this organization to be forceful in adversity.

### **Help Thy Brother**

One other category in which we could find direction, would be to form a reservoir of men willing to work in a colleague's office for brief periods of time while he recovered from an illness or accident. I am alarmed over the statistics that focus on how vulnerable we dentists really are in the maddening pressures of our everyday lives. Coronary accidents and severe illnesses that require many months of recovery are more of a fact than fiction. Newspaper accounts rarely go beyond their opening sentences or reports at local, state, regional and other kinds of meetings without mentioning some friend, classmate or associate. More times than not he has met with serious consequences that have kept him away from his dental practice. Let me encourage our members in all areas of our state to bind themselves into common, local units.

This assistance to another when it could take away the pain of adversity is another step in establishing good community relations. Both patient and doctor would benefit since it means continued service to complete restorations or appliances already begun and maintenance of recall patients.

### The Dentist and the Hospital

As your voice away from your office, the North Carolina Dental Society could intercede when pressures are placed on your professional lives. There is no logic within the sensibility of reasoning for a well-trained dentist to require supervision from a physician while he performs acceptable dental procedures in a hospital. This is as archaic as using hand shovels for ditch digging while the metal monster sits idly by — its steam cut off and the shovel stilled. Even the medicallegal responsibility is not satisfied for, as the surgeon, the dentist is still responsible for complications that occur. His medical colleague can in no way accept this bond, nor even share a part in a court decision. Testimony that he might offer would contribute only slightly in the dentist's favor since the medical doctor generally has little knowledge of dental procedure or specific head and neck anatomy. We do have an obligation to our medical and surgical colleagues and must avail ourselves of proper training and respect for accepted hospital operating room procedures. It is a sad fact that many men do not understand simple scrub procedures; this is certain to cause unfavorable comment by those poersons in the operating suite.

The North Carolina Dental Society is in an enviable position to speak out against such outrages for it is a recognized voice among other organizations. There is every reason to support a stand which would place our position in the hands of those directly affected. Here again, I ask that you consider these increased costs and measure their worth to you as a practitioner of dentistry.

### **Dental Laboratory Relations**

There is an area of neglect that concerns me as we develop better dental-dentist laboratory relations. Some years ago we were successful in having our prescription law passed. Four years later it is evident many men do not follow the good logic behind its passage. There are flagrant violations occurring each day with woeful neglect for proper instructions on these prescriptions sent with laboratory procedures. A visit to most commercial laboratories across the state reveals such facts.

As a member of the Prosthetic Dental Service Committee for ten years and as chairman for most of this time I am certain of some impressions made during numerous meetings with dentists, dental laboratory owners and technicians. Ethical laboratory personnel do not want to practice dentistry or deal directly with patients. They resent any situation that forces them to act otherwise, whatever the reason. It is the responsibility of ethical dentists to prevent this encroachment on our specific relation with either of these because of the unusual circumstances that surround our two organizations.

We are fortunate to have as a counterpart to dentistry an organization that is solely responsible to

us. Few, if any, groups can claim this distinction. Therefore, we need to be judicious in our attitude and treatment of this fine organization that can mean so much to North Carolina dentistry.

Let me encourage you to give them careful consideration in your business transactions, place confidence in the wisdom of their experience and treat the members with respect. It appears to me as I have observed the change which has taken place with our technicians of today that they need a chance to be considered a friend to dentistry. They want to feel important and it is up to us to see that this need is satisfied.

### The Secretary-Treasurer

For thirteen lucky years, it has been our good fortune to have an executive secretary. It has been my privilege and pleasure to work with him during this time, and watch more and more of the Society's business come from his office. With the advent of this once considered luxury, and now realized absolute necessity, I have observed the decreased need for our secretary-treasurer of the North Carolina Dental Society to have a long term of indoctrination.

It is still true that some of our best leaders have come through this office, thoroughly proving its worth-whileness. However, it seems to me that three years is no longer a necessity for training a man, and we would do well to consider a reduction in the number of years this office consumes from a useful career. Perhaps we might even think on the matter of this office leading to the president-elect of the North Carolina Dental Society after a one

year term, thereby giving more men further training for the rigors of the office of president of our Society.

#### Fluoridation

A mandatory fluoridation law for the State of North Carolina would provide further protection for its people from the ravages of dental decay. Already three states have passed this desirable legislation; they are Connecticut, Illinois and Minnesota. The ease with which these states carried this plan through its respective stages to acceptance by the legislators, should give encouragement to our efforts. However, due to the numerous areas of local. individual water supply, this would not be as effective as one might imagine. A strong, well planned program of office treatment accompanied by home care is a necessary part of the preventive phase of fluoridation when there is no local. communal water supply. homes are still furnished daily water needs by private, self-maintained. deep well systems. Let me assure you that this is one area being explored by your State Planning Committee and will receive proper identification during its deliberations.

### The President-Elect

As I close, I would place before you an item which has merit. I am fortunate to have a friend like Maurice Richardson who so graciously provided this time today. Few presidents-elect have enjoyed the privilege to outline programs and ideas before assuming office. This is a severe discrepancy, and it is not until a man has completed his year of service that he is given time to explain what was done during his term.

Therefore, I would like to put forth an idea that several members have expressed in private. It seems better for the president-elect to share the Sunday night slot at our general session. Here he could propose ideas and outline programs as I have done this morning. Consequently, year after year, direction and leadership would be brought before the main body of our organization and it would be constructive at a time when it could have the greatest effect.

Thank you again for allowing me these few minutes to express my concern about events that will affect your lives, and professional careers. Surely, this is a day and age of major change, so we must be prepared to help direct these paths of change. Let's work together with but one goal in sight — make North Carolina a real force in organized dentistry.

MEDICAL ARTS BUILDING LUMBERTON, N. C.

## **Ohituaries**

**Dr. Z. L. Edwards,** 77, of Washington, a life member of the Fifth District Dental Society, the North Carolina Dental Society, and the American Dental Association, died April 26, 1968.

**Dr. Livious D. Herring,** 53, of Raleigh, a member of the Fourth District Dental Society, died May 14, 1968.

**Dr. Wade H. Johnson,** 68, of Plymouth, a life member of the

Fifth District Dental Society, the North Carolina Dental Society, and the American Dental Association, died May 7, 1968.

**Dr. Clyde E. Minges,** 76, of Rocky Mount, a life member and former president of the American Dental Association, and a life member of the Fifth District and North Carolina Dental Societies, died July 12, 1968.

**Dr. R. Luther Whitehurst**, 66, of Rocky Mount, a life member of the Fifth District Dental Society, the North Carolina Dental Society, and the American Dental Association, died April 16, 1968.

# Dental Education Program at Guilford Technical Institute

### by Richard M. Fields, DDS

Dr. Fields is editor of the Third District. He graduated from the University School of Dentistry in 1956, spent 2 years in the U. S. Army Dental Corps, and has been in general practice in Pleasant Garden since 1958. He has served on the Guilford County Board of Health since 1964 and as its chairman 1965-67.

The training of dental hygienists under the Manpower Development and Training Act began at Guilford Technical Institute in April, 1966. Under this program, the Federal Government provided for the establishment of dental hygiene and dental assistant programs to be made available to young women who were in need of assistance in obtaining an education. Thus, the MDTA program was established with its primary function of aid to individuals of the economically depressed segment of the population.

### **Federal Control**

A federally financed program from its inception, the program was administered by government officials. The applicants for the program were screened not by school officials but by the State Employment Commission. There was a Dental Advisory Committee made

up of members of the Guilford County Dental Society to make recommendations on the screening of applicants. However, the final decision on an applicant rested solely with the State Employment Commission.

At this point, it should be noted that without the help of the Guilford County Dental Society, this program would have been impossible as members of the Society have volunteered to teach classes and instruct in the clinics, as well as serve on the Advisory Committee.

The Guilford County Dental Society made the decision to play this role in the development of the program because the members felt very strongly that the profession should have a voice in the training of auxiliary personnel and all the authority should not be vested in government control.

The Dental Advisory Committee recommended that each applicant should have a high school diploma, be in the upper one-half of her graduating class in high school, and have at least one year of chemistry. This ruling was not necessarily administered under the authority of the State Employment Commission.

The program was established with four quarters for the dental assistants program and six quarters for the dental hygienists program. Under the MDTA, each student

was given tuition, a monthly living allowance, transportation, books, and supplies and even shoes and uniforms free.

The clinics were excellently equipped by the MDTA program with new equipment, and necessary salaries and supplies were likewise paid for by the Federal program.

### **State Assumes Responsibility**

The MDTA, however, terminated its contact with the dental hygienists and assistants programs in March, 1968. This left the Institute in a rather embarrassing and precarious position until the State of North Carolina accepted the responsibility of underwriting the program as of September of 1968.

With this favorable change, the administration of the program and the screening of applicants is now vested in the school itself and in the Dental Advisory Committee. Also, now, economic condition has no bearing upon the acceptance of an applicant. The applicant must be approved by the office of admission of the Institute, by the Institute, and by the Dental Advisory Committee.

Under State funds the program is not free to students. The tuition is now \$32.00 a quarter, and all supplies, and books, must be furnished by the student.

Under the administration of Dr. George F. Mayer, the program will be geared as closely as possible to the corresponding program at the School of Dentistry at Chapel Hill and to meet the standards established for such programs by the ADA.

With Mr. Luther Medlin as chief administrator of the Guilford Technical Institute, it now appears that



DR. FIELDS

the school and specifically the dental hygienist and assistant programs will enjoy a period of growth and progress.

In conclusion, it might be said that Guilford Technical Institute is definitely filling a gap that has existed in the educational system. The school of dental hygiene and assistant training has undergone growing pains that are to be expected in any new endeavor, but these difficulties that have made themselves evident in the past in no way should hinder the future and the great potential that lies in these programs.

It may further be said that credit should be given to the Federal Government for the initiation of the MDTA programs in the first place. Were it not for these Federally financed programs, this school would not have gotten its start. The excellent equipment in the dental hygiene and assistant department is of incalculable value to the program as was the funding of the salaries and supplies.

Box 336 Pleasant Garden, N. C.

## The Effects of

### By Barbara Gaddy

Miss Gaddy is a rising junior at the University of North Carolina, at Chapel Hill, majoring in physical education. She is the daughter of Mrs. Loretta Gaddy, a dental hygienist. This paper was written for a physical education class after a controversy with her professor on the merits of fluoridation. She must have proved her point because the professor gave her an "A".

The discovery of the relationship between fluoride salts in natural drinking water and resistance to dental caries constitutes a significant advance in the field of predentistry. ventive The surfaces of the tooth which receive adequate (one part per million) concentrations of fluoride ions are less susceptible to dental caries. Persons who continuously drink naturally fluoridated water (1 ppm) from birth develop far fewer cavities than those who are unable to consume fluoridated water. Recent reports substantiate earlier hypothesis that natural fluoride in water causes a marked reduction in the number of dental caries.

Studies began in communities where there was evidence of an enamel defect (mottled enamel). In such places as Colorado Springs, Colorado; and Aurora, Illinois, where the domestic water is naturally fluoridated, Doctor Dean and his associates observed that although the teeth were discolored, they were far less susceptible to decay. However, the discoloration

of the tooth enamel did not occur unless the water contained over 2 parts per million of the fluoride ion. Observations on children in twenty-one American cities showed that numbers of decayed, missing, and filled teeth (DMF) notably less when the natural fluoride concentration of the water was approximately one part per million, and no discoloration occurs at this low level. Dean's studies in areas where the fluoride ion is found naturally in drinking water provided scientific evidence that a concentration of approximately one part per million would reduce dental caries in children by approximately 60 per cent, as compared to children drinking fluoride deficient water. These studies have sparked further studies in the adjustment of the fluoride ion concentration in drinking water. Adiustment of the fluoride ion concentration in public water plies has proved its worth and is here to stay in the field of preventive dentistry. During the past seventeen years a large number of communities have reported that the addition of fluoride ion will improve the dental health of children, while at the same time will not injure human tissue or the community water supply. studies beginning in 1945, and one in 1947 have reported their findings periodically. They are Newburgh, New York; Grand Rapids, Michigan; Brantford, Ontario; and Evanston, Illinois, respectively. Although it is not possible to compare them with each other, because of

### Fluoride on Dental Caries

different methods of reporting, criteria used, and age groups, it is possible to compare them to control cities where no fluoride program has been enacted. However, in Grand Rapids and Evanston, the control cities were lost before the reports were complete.

### **Grand Rapids Study**

The Grand Rapids, Michigan fluoridation study was planned and carried out with the co-operation of Michigan State Health Department, the City-County Health Department, and the University of Michigan. In January of 1945 the fluoride content in the public water supply of Grand Rapids was adjusted to one part per million, and that level has been maintained since then. The baseline data for all Grand Rapids children, ages five through sixteen was obtained during the 1944-1945 school year. The group was controlled by the determining factor that 19,680 out of the 28,000 children were born in Grand Rapids and had lived there all their lives. The study dealt exclusively with continuous-resident white children. Similar baseline data obtained from continuousresident white children of Muskegon, Michigan, which has a similar domestic water supply, with the exception that the Muskegon water supply was non-fluoridated. Muskegon became the control city with normal drinking water, while Grand Rapids was the experimental city with fluoridated drinking water. After establishment of the baseline data from both the control and



MISS GADDY

experimental cities, examinations of selected age group children were made annually over a fifteen year period. Six years later findings showed that dental caries in the Grand Rapids children dropped significantly below the control group in Muskegon. These findings, combined with similar trends in fluoridation study, resulted in the institution of the fluoridation program in Muskegon in July of 1951.

Examinations continued for three years in Muskegon, and results showed that caries measured by DMF standards were extremely lowered in children under eight years of age. Further examinations in four - year intervals showed a marked decrease in decayed, missing and filled teeth. After fifteen years of fluoridation study on Grand Rapids children, aged 12, 13, and 14, who had been exposed to fluoride usage from birth, a marked decrease of 57 per cent, 63

per cent, and 51 per cent, respectively, was reported on decayed, missing, and filled teeth. At the conclusion of his report, Doctor Dean commented that "no such dramatic and persistant inhibition of caries in large population groups had ever been demonstrated by any other means than fluoridation of the domestic water supply."

The Grand Rapids study was controlled for all variable factors involved. The children were examined at regular intervals by three different dental officers. All three drew the same qualitative and quantitative conclusions. In addition, all three findings concluded that no undesirable cosmetic effects due to the dental fluorisis had been observed.

### **Evanston Study**

A similar fluoridation program went into effect in Evanston, Illinois on February 11, 1947, where the level of fluoride was maintained at one part per million, without interruption. A sixteen-year study survey began to thoroughly test the effectiveness of the fluoridation program. The findings showed that between the years 1947 and 1962 there was a gradual, but definite decline in dental caries. In six to eight year old children there was a per cent decrease in caries formed in deciduous teeth, and a 68 per cent decrease in permanent teeth. In children twelve to fourteen years of age, a marked decrease of 51 per cent was reported. Several years after the program was initiated, the control city for Evanston was lost just as Muskegon was lost as an ideal control city.

### Newburgh — Kingston Study

An ideal program was set up in 1945 with Newburgh, New York as the experimental city and Kingston. New York as the control city. The study-control area relationship was maintained continuously throughout the program. The fluoride level in Newburgh was maintained at one part per million throughout the study, while at the same time Kingston remained fluoride deficient. The baseline data showed that rates for 7-14 year olds in both cities were comparable. Ten years after fluoridation began in Newburgh (1954-1955), the rate of caries increased in Kingston, while there was a steady decline in the rate in Newburgh. This same situation continued to worsen for the duration of the study. The validity of this program can be seen in the fact that dental care was the same in both cities. The only variable factor was the addition of fluoride ion to the Newburgh water supply.

Although fluoride is most effective when ingested in children during the years of tooth development, the benefits of childhood fluoridation continue to adult life. Studies in Colorado Springs, Colorado (natural fluoride) and Boulder, Colorado (fluoride deficient) showed that among adults under 44 years of age who had a lifetime of fluoridated water had 60 per cent less dental caries than a similar age group who did not have the benefit of fluoridated water.

### **Additional Benefits**

There are additional benefits of fluoridation programs for adults in

the study of malocclusion in young adults. The study was based on the idea that loss of first permanent molars due to decay may be a factor of etiology of malocclusion. In 1960 a study by two qualified Newburghorthodonists in the revealed that Kingston program 35.2 per cent of Newburgh children, ages 14-16, had normal occlusion as compared to 12.7 per cent in Kingston. Consequently, adults receive the benefit of a fluoridation program as well as children.

### **Topical Application**

These recent studies in natural fluoridation have sparked the institution of direct application of fluoride. Many dentists have prescribed tablets containing one milligram of fluoride for use by children not consuming fluoridated water. The daily use of one tablet provides the same fluoride intake as would be obtained from fluoridated water. The use of fluoride is now an accepted proceedure in preventive dental caries programs, and some form of topical fluoride application is used following plaque removal, scaling, and polishing teeth. Topical application of a fluoride gel by use of vinyl mouthpieces have proved to be another effective means of fluoride application. Studies by Knutson have shown that a four-minute application of a 2 per cent solution of sodium fluoride resulted in 40 per cent fewer cavities.

The manner in which the fluoride application works is not completely understood, but the ways in

which it exerts effects are. First of all fluoride makes the enamel more resistant to acid demineralization. Secondly, it inhibits the bacterial intracellular enzyme system which converts sugars to acid. Finally, it prevents microorganisms from deriving benefit from the breakdown and invasion of enamel and dentin. Enamel is less soluble in acids when its crystalline structure contains fluoride, and there is no other chemical with the same effect. Fluoride not only limits the acid production, but it also, in high concentrations such as fluoride gels, has a direct anti-bacterial effect. However the optimal benefit of fluoride occurs if acquired during the process of tooth formation.

### Conclusion

The research done by the controlled study groups in Grand Rapids, Newburgh, and Evanston is conclusive proof that the use of fluoride both in drinking water and in topical application has a positive effect on the decline of dental caries. Such programs are being initiated in cities throughout the United States to give the inhabitants the greatest resistance to dental caries. More and more dentists are adding a program of fluoride therapy to their own practice. With such positive evidence as 68 per cent fewer cavities due to the use of fluoride, it can easily be predicted that fluoridation has "proved its worth and is here to stay."

CHAPEL HILL, N. C. APRIL 12, 1968

## Needed-Body "Tune Up"

## By Barry G. Miller, DDS, and Helen Beleos, BS

How can a "tune-up" job of your body make you and your patients the human dynamos you'd like to be and like them to be? What service can insure action, stamina, wellbeing, and long-life with positive dental health?

What well-informed individual has not sought this challenge! The subject is young—the idea fascinating — because it's about you and your patient and how you can help yourself and your patient. It's about how you can "run," about how better nutrition can give one better mileage!

### proteins-the chassis builder

Our bodies are largely made of protein—skin, muscles, internal organs, nails, hair, brain, supporting dental tissue, and the base of bones.

The digestive processes break the protein nutrients down into vital amino acids containing nitrogen, which pass into the blood and are carried throughout the body. The cells then select the specific amino acids they need and use them in constructing new body tissues and

such vital substances as antibodies, hormones, enzymes, and blood cells. The specific dynamic action of proteins is the largest of the three major nutrients.

Some advantages of an adequate protein diet include:

- 1. energy readily produced and sustained
- 2. high resistance to diseases and infections
- 3. maintenance of normal digestion

Sources: Meats, fish, fowl, eggs, fresh milk, buttermilk, yogurt, cheese, soybeans, powdered yeast.

### carbohydrates-the go-go fuel

The usual American diet is made up of one-half carbohydrates. These are sugars, starches, and celluloses, which are the principal sources of energy in the *ordinary* diet. Some, also, determine the bacteria flora of the digestive system; others are needed to use fat efficiently. Carbohydrates do not build body tissue nor do they improve general health and attractiveness.

Carbohydrates are apparently one of the nutritional factors which influence dental caries. Bacteria through their production of acid and

enzymes may be the critical force for a type of dental caries. Almost every food we eat supplies natural sugar or potential sugar in some form. Carbohydrates that are sticky and those that are finely ground adhere to the teeth with resulting low clearance from the mouth, thus inviting the possibility of potentially damaging high concentrates of acids.

Less tooth decay develops if the sugars are eaten with meals than if they are eaten between meals. Pavlov's dog—simple dilution!

In foods which are overprocessed and highly refined, many nutrients have been discarded and sugar added; prefabricated foods, particularly, are in this group. In order to maintain general health and dental health, these foods offer little nutritionally and should be avoided. Such products include:

- 1. "enriched" white breads and cereals
- 2. packaged cereals
- 3. refined bakery products and prepared mixes
- 4. precooked potatoes
- 5. refined spaghetti, macaroni noodles
- jams, jellies, candies, and desserts prepared with refined products

- 7. imitation fruit juices
- 8. all varieties of carbonated drinks
- 9. processed cheeses

Sources: root vegetables, whole grain breads and cereals, and fresh fruits and juices.

### fats-the super lube

Approximately one-third of the average American's total calories comes from fats. Fats provide maximum energy with the least amount of bulk.

The layer of adipose tissue over the skeleton provides protection against injury by absorbing shock. Its thickness prevents loss of body heat. Some members of the fat family are vital to biological activity in that fats combine with other nutrients, help to support them, and, together with them, are used in building cell structure.

Sources: natural vegetable oils.

### vitamins—the spark plug system

Vitamins cannot be used as sources of energy, but are absolutely essential to life. The various vitamins are different chemically, but are similar in that they cannot be manufactured by the animal

body. They must be present in the diet in small amounts for metabolism to occur normally. They help to release energy from foodstuffs and regulate body functions.

### A-the "anti-infection" vitamin

A enables cells to be more resistant to infection, is necessary in the maintenance of normal nerve tissue and growth of bone and enamel of teeth.

Sources: butter, eggs, fish liver oils. Plants containing carotene (a yellow substance) are easily changed into Vitamin A in animal Cells.

### C—the "connective tissue" vitamin

C is necessary in maintaining normal connective tissue and blood vascular integrity. It is also necessary for normal development of teeth and bone.

Sources: fresh oranges, grapefruit, strawberries, cantaloupes, lemons.

### D-the "sunshine" vitamin

**D** functions primarily in maintaining normal absorption of calcium and phosphorous from the intestines. If a deficiency exists, these minerals are not absorbed and formation of bones and teeth may be retarded.

Sources: liver oils, butter, eggs, and milk.

### E-the "antioxidant" vitamin

E protects Vitamin C, Vitamin A, and unsaturated fatty acids against destruction in the body.

Sources: wheat germ of cereals, wheat germ oil, corn oil, peanut oil, cottonseed oil, green-leaved plants,

meats, butter, milk, eggs, and fish liver oils.

### K—the "coagulation" vitamin

 $\mathbf{K}$  is essential for correcting clotting time of blood.

Sources: cabbage, spinach, other green vegetables, tomato, cheese, egg yolk, and liver.

## B-complex—the "anti-stress" vitamins

In one way or another, all "B" vitamins are concerned with the *utilization of foods*. Persons eating large amounts of food need far greater quantities of these vitamins than do persons with small food intakes.

Some B vitamins are used in changing sugar into energy or fat; some in normal nerve functioning; some are synthesized by intestinal bacteria. All tend to occur together in foods.

Sources: yeast, whole grain cereals, liver, nuts, pork.

To establish a cycle wherein the enegy level is at a maximum, the intake of carbohydrates should be balanced since the more one eats of this nutrient, the more the body generally requires. When there is a proper combination of carbohydrates, proteins, and fats, the sugar is absorbed into the blood over a longer period of time and energy is maintained at a higher level for a longer duration. It is the adequate intake and break-down of protein which maintains energy, general health, positive dental health, long periods of concentration, and learning abilities.

When antibiotics are used in the body, valuable intestinal bacterial flora are altered causing the B-complex vitamins to be absorbed at a reduced rate. This, in turn, results in the less efficient utilization of protein for energy; again, requiring the individual to depend on carbohydrates to sustain an energy level with resulting possible insult to dental health.

The vitamin-protein interrelationship is vital in forming enzymes which, in turn, are involved in the metabolism of amino acids. Thusly, an excessive use of carbohydrates and antibiotics reduces body efficiency and may add directly to dental pathology, particularly, dental caries.

### minerals—staying power

Calcium, phosphorous and other minerals function in several ways. They are vital to and during growth and development especially in imparting rigidity and strength to bones and teeth. These are also vital during heavy exercise and physical activity.

Sources: poultry, seafood, beef, milk, iodized salt.

## physical exercise—the timing mechanism

Physical exercise is another key to the ignition of your and your patient's well-being.

Proper ventilation is essential to:

- 1. the efficient and thorough elimination of metabolic byproducts
- 2. the sustaining quality of the circulatory pattern and muscle tissue, body tone
- 3. the maintaining of appetite and elimination of the muscular system's state of tenseness.

It is presumed that the comprehension and teaching of nutrition in the performance of a dental health service may be of an importance equal to that of dental materials. One could say that what the dentist places between the ears may be more important than what is placed in the oral cavity!

1927 Brunswick Ave., Charlotte, N. C.

# Enamel Dentin Thickness of Young Maxillary Permanent Incisors

By W. L. Hand, Jr., DDS

THIS PAPER RECORDS the dimensions of enamel dentin thickness and its relation to the pulp of maxillary anterior laterals and centrals of eight (8), ten (10), and twelve (12) vear olds. The purpose of this research is to determine the shortest distance from the surface enamel to the pulp at various levels in the crown. Difficulties in observing the dentin-enamel junction during restorative procedures necessary to restore fractured anteriors dictated the use of the enamel dentin thickness as a basis for measurement rather than the dentin enamel junction. Specific depth cuts measured from the surface of the enamel, rather than from the dentin enamel junction, are easy to use and judge. Only with precisely controlled cuts and adequate knowledge of the safe depth to which tooth structure may be operated safely, can the operator plan preparations within the special limitation of the tissues involved. The increase of full coverage and pin techniques for young permanent anterior teeth dictates complete measurements of tooth structure of these teeth.

Measurements of distances from the dental pulp to easily recognized land marks or measurements of the crown are not found in the literature applying to young permanent teeth. Black, in 1908, wrote, "Conditions have arisen which tend to mar the progress of the more scientific phases of thought in dentistry by diverting thought to the mechanical." It is the aim of this article to give an accurate basis of judgment to the mechanical.

## Methods of Measurement and Preparation of Teeth

The teeth selected were noncarious, unfractured maxillary central and lateral incisors. Ages examined were the eight (8), ten (10), and twelve (12) year old groups—plus or minus nine (9) months. Ages of the teeth were determined by a comparison of growth and development using data

compiled by Dr. I. Schour and Dr. M. Massler. The extreme difficulty in procuring non-carious whole teeth in these age groups limited the number of specimens available. The total number of teeth measured was eighty-nine (89); the number of sections, two hundred fiftyeight (258); and the number of measurements, one thousand, two hundred eighty-one (1,281). The disparity between the number of teeth, the number of sections, and the number of measurements was due to the fracture of the specimens rendering them useless for accurate measurements.

Measurements were made for crown length from the tip of the incisal to that point of the curve of the cervical line on the labial surface closest to the apex of the root. Further measurements were made after grinding the teeth in a horizontal plane parallel to the cervical line. Measurements were obtained using a metri-caliper under two and one - half (21/2) power magnification. Three (3) sets of measurements were taken for each tooth resulting in an average of fifteen (15) measurements per tooth. As sliced sections tended to fracture the teeth.

TABLE I
MAXILLARY CENTRAL INCISORS
AGE 12

### NUMBER OF TEETH MEASURED: 19

		Mean M.M.	Minimum M.M.	Maximum M.M.
Crown Length		11.6	9.6	13.7
Mesial Pulp Horn to Incisal		4.5	3.4	5.2
Distal Pulp Horn to Incisal		5.2	1.3	6.4
Enamel Dentin Thickness 4.8				
Mean M.M. from Incisal				
	Mesial	2.1	1.8	2.4
	Distal	2.6	2.1	3.1
	Buccal	2.2	1.9	2.4
	Lingual	1.9	1.7	2.2
Enamel Dentin Thickness 7.5				
Mean M.M. from Incisal				
	Mesial	2.2	1.7	2.6
	Distal	2.5	2.1	2.8
	Buccal	2.4	2.1	2.6
	Lingual	2.5	2.0	3.1
Enamel Dentin Thickness 1.0				
M.M. from Cervical Line*				
	Mesial	1.9	1.6	2.3
	Distal	2.0	1.7	2.5
	Buccal	2.3	2.1	2.8
	Lingual	2.7	2.6	3.1

<sup>\* 1.0</sup> M.M. from the Cervical. Line is measured from that point of the curve of the cervical line on the labial surface closest to the apex of the root,

grinding from the incisal apically to the desired level produced a good readable surface. The first measurement was taken when a pulp horn was exposed and the measurement recorded as a mesial pulp horn exposure, or a distal pulp horn exposure, or both mesial and distal. The distance of this first parallel cut to the cervical line was measured using that point of the cervical line on the labial closest to the apex of the root. The distance of exposure to the incisal edge was obtained by subtraction. Measurements were taken of the enamel

dentin thickness mesially, distally, buccally, and lingually — thus the smallest measurement recorded in each table is the minimal amount of tooth structure adjacent to the pulp. If only a mesial pulp horn were exposed, no distal measurement was made until a distal extension of the pulp was exposed. The second set of measurements was made from the middle third of the crown. The distance from parallel cut to the cervical line was measured and the enamel dentin thickness measured mesially, distally, buccally, and lingually. The

## TABLE II MAXILLARY LATERAL INCISORS

### AGE 12

	NUMBER	OF	TEETH	MEA	SURED:	18
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		Mean M.M.	Minimum M.M.	Maximum M.M.
Crown Length		9.8	8.3	12.0
Mesial Pulp Horn to Incisal		4.8	3.9	6.3
Distal Pulp Horn to Incisal		5.3	4.2	6.4
Enamel Dentin Thickness 5.0 Mean M.M. from Incisal				
	Mesial	1.9	1.4	2.5
	Distal	2.4	2.0	2.9
	Buccal	1.9	1.4	2.6
	Lingual	2.1	1.4	2.5
Enamel Dentin Thickness 7.0 Mean M.M. from Incisal				
	Mesial	1.7	1.5	2.2
	Distal	2.0	1.7	2.2
	Buccal	2.3	1.9	2.5
	Lingual	2.5	1.8	3.3
Enamel Dentin Thickness 1.0 M.M. from Cervical Line				
	Mesial	1.4	1.2	2.1
	Distal	1.6	1.4	2.2
	Buccal	2.1	1.8	2.6
	Lingual	2.5	2.1	3.0

third set of measurements was made one (1.0) m.m. from the cervical line at a point closest to the apex of the tooth on the labial surface and recorded as enamel dentin thickness mesially, distally, buccally, and lingually.

All measurements were calculated for the mean measurement, and the minimum and maximum measurement

Tables were completed and charted.

NUMBER OF TEETH MEASURED: 18

The data was analyzed for the mean, the minimum and maximum range of crown length, the distance of the mesial pulp horn to the incisal, and the distance of the distal pulp horn to the incisal. The data was also analyzed for the mean, minimum and maximum range of enamel dentin thickness, mesially, distally, buccally, and lingually at three (3) levels in the crown, Tables I through VI.

# TABLE III MAXILLARY CENTRAL INCISORS AGE 10

NOWIDER OF TEETH MEASON.	LD. 10			
		Mean M.M.	Minimum M.M.	Maximum M.M.
Crown Length		11.1	7.4	13.5
Mesial Pulp Horn to Incisal		4.4	2.0	6.3
Distal Pulp Horn to Incisal		5.0	2.0	7.5
Enamel Dentin Thickness 4.7 Mean M.M. from Incisal				
	Mesial	2.1	1.8	2.6
	Distal	2.5	2.2	3.0
	Buccal	2.1	1.7	2.5
	Lingual	1.9	1.1	2.8
Enamel Dentin Thickness 7.5 Mean M.M. from Incisal				
	Mesial	2.2	1.9	2.4
	Distal	2.4	2.1	3.3
	Buccal	2.4	2.1	3.2
	Lingual	2.5	2.0	3.0
Enamel Dentin Thickness 1.0 M.M. from Cervical Line				
	Mesial	2.0	1.6	2.0
	Distal	2.1	1.7	2.3
	Buccal	2.4	1.8	3.1
	Lingual	2.8	2.1	3.1
	<i>C</i>			

### TABLE IV

### MAXILLARY LATERAL INCISORS

### **AGE 10**

NUMBER	OF	<b>TEETH</b>	<b>MEA</b>	SURED:	18
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		Mean M.M.	Minimum M.M.	Maximun M.M.
Crown Length		10.4	9.5	11.5
Mesial Pulp Horn to Incisal		4.8	3.5	6.2
Distal Pulp Horn to Incisal		5.4	4.0	5.4
Enamel Dentin Thickness 5.1 Mean M.M. from Incisal				
	Mesial	2.1	1.5	2.5
	Distal	2.5	2.3	2.9
	Buccal	2.1	1.6	2.8
	Lingual	1.7	1.1	2.4
Enamel Dentin Thickness 7.2 Mean M.M. from Incisal				
	Mesial	1.7	1.5	2.1
	Distal	1.9	1.6	2.6
	Buccal	2.5	1.8	2.8
	Lingual	2.2	1.6	2.7
Enamel Dentin Thickness 1.0 M.M. from Cervical Line				
	Mesial	1.4	1.2	1.9
	Distal	1.6	1.2	1.9
	Buccal	2.0	1.8	2.7
	Lingual	2.6	2.2	3.2
	_			

### TABLE V

### **MAXILLARY CENTRAL INCISORS**

### AGE 8

### **NUMBER OF TEETH MEASURED: 8**

		Mean M.M.	Minimum M.M.	Maximum M.M.
Crown Length		11.3	10.5	13.0
Mesial Pulp Horn to Incisal		4.2	2.6	5.4
Distal Pulp Horn to Incisal		5.2	4.5	5.9
Enamel Dentin Thickness 4.7 Mean M.M. from Incisal				
	Mesial	1.9	1.7	2.2
	Distal	2.3	2.0	2.5
Enamel Dentin Thickness 7.0 Mean M.M. from Incisal				
	Mesial	2.2	1.8	3.4
	Distal	2.4	1.9	2.8
	Buccal	2.8	2.1	3.3
	Lingual	2.8	2.6	3.2
Enamel Dentin Thickness 1.0 M.M. from Cervical Line				
	Mesial	1.9	1.5	2.5
	Distal	2.1	1.6	2.6
	Buccal	2.3	1.8	3.0
	Lingual	2.7	1.8	3.0

### **TABLE VI**

### **MAXILLARY LATERAL INCISORS**

### AGE 8

### **NUMBER OF TEETH MEASURED: 8**

		Mean M.M.	Minimum M.M.	Maximun M.M.
Crown Length		8.5	8.2	10.6
Mesial Pulp Horn to Incisal		5.0	3.0	6.6
Enamel Dentin Thickness 5.0 Mean M.M. from Incisal				
	Mesial	2.0	1.8	2.2
	Distal	2.2	1.8	2.5
	Buccal	2.0	1.7	2.8
	Lingual	1.6	1.0	2.2
Enamel Dentin Thickness 1.0 M.M. from Cervical Line				
	Mesial	1.5	1.2	2.2
	Distal	1.6	1.2	2.2
	Buccal	2.0	1.6	2.7
	Lingual	2.3	1.7	2.7

### **Summary**

The enamel dentin dimensions of your permanent maxillary anterior teeth and the relations to the pulps of ages eight (8), ten (10) and twelve (12) year olds are recorded in this paper.

301 ELKS BUILDING NEW BERN, N. C.

### LOCAL DENTAL SOCIETIES IN THE SECOND DISTRICT

Thanks to the effort of Dr. Kenneth D. Owen, editor, Second District, the following information on the seven local dental societies in the Second District is furnished.

BLUE RIDGE DENTAL SOCIETY (Alleghany, Surry, Wilkes, and Yadkin counties). Meets the fourth Tuesday each month at the Galvinoth Y.M.C.A., Elkin. The current officers are:

President: James A. Harrell, El-kin

Vice President: Allie H. Duncan, Elkin

Secretary - Treasurer: L. Dwight Ware, Wilkesboro

CABARRUS COUNTY DENTAL SO-CIETY. Meets the first Thursday of the month except in the summer at Cabarrus Country Club. The current officers are:

President: Joe V. Davis, Jr., Concord

Vice President: John H. Stancil, Kannapolis

Secretary-Treasurer: E. B. Morgan, Kannapolis

CHARLOTTE DENTAL SOCIETY (Mecklenburg and Union counties). Meets the last Monday each month from September to May at Ramada Inn East at 6:30 p.m. The current officers are:

President: J. O. Thorpe, Charlotte

Vice President: William A. Jarrell, Jr., Charlotte

Secretary: James J. Elliott, Charlotte

Treasurer: William C. Bean, Charlotte

DAVIDSON COUNTY DENTAL SO-CIETY. Meets the first Thursday each month at the Dutch Club in Lexington. The current officers are:

President: Ralph O. Hawkins, Denton

Vice President: H. F. Wilkins, Jr., Lexington

Secretary-Treasurer: Charles W. Hoover, Lexington

FORSYTH COUNTY DENTAL SO-CIETY. Meets the first Tuesday each month at the Robert E. Lee Hotel in Winston-Salem. The current officers are:

President: Edmund B. Hopkins, Winston-Salem

Vice President: John S. Long, Winston-Salem

Secretary: Robert M. Wilkinson, Winston-Salem

Treasurer: Robert W. Clinard, Winston-Salem

IREDELL COUNTY DENTAL SOCIETY. (Alexander and Iredell counties). Meets the third Tuesday in each month September through May at the Statesville Country Club. The current officers are:

President: Marshall B. Corl, Statesville

Vice President: Harding W. Rogers, Jr., Mooresville

Secretary-Treasurer: Wallace B. Honeycutt, Statesville

ROWAN COUNTY DENTAL SO-CIETY. Meets the third Tuesday in each month at Howard Johnson Restaurant in Salisbury. The current officers are:

President: Bruce A. Ketner, Salisbury

Vice President: Glen E. Blackwell, Salisbury

Secretary - Treasurer: James C. Eagle, Jr., Spencer

### Second District Editor



DR. OWEN

Dr. Kenneth D. Owen of Charlotte is the editor of the Second District Dental Society. He is a gradu-

ate of Davidson College and the University of North Carolina School of Dentistry. Following two years of service as a captain in the U. S. Army Dental Corps, he returned to Chapel Hill for graduate study and earned a masters degree in orthodontics.

Since 1966 he has practiced in Charlotte and is presently associated in the orthodontic practice of Drs. Owen and Owen.

Dr. Owen is a member of the North Carolina Orthodontic Society, the Orthovista Orthodontic Study Group and an associate member of the Southern Society of Orthodontists and the American Association of Orthodontics.

## First District Dental Society



Cecil A. Pless, Jr. President

## Lift Up Your Eyes...

I would like to extend a special invitation to all members of the North Carolina Dental Society, their wives, and auxiliaries to attend the First District meeting in Asheville, September 28-30, 1968. The Grove Park Inn is one of the South's most attractive convention hotels and our mountains are unmatched in beauty at that time of year. I particularly urge all First District members to share in the fun and knowledge our meeting offers.

Our clinician, Dr. Gordon Christensen, was in Asheville last winter and gave a seminar on all facets of operative dentistry. Those present unanimously agreed that Dr. Christensen is outstanding. We are indeed fortunate to have him again in Asheville to speak to the District.

An additional enticement is a portable television set that will be given as a door prize at the luncheon Monday, September 30. The drawing will be made at that time and one must be present to win. Also, golf prizes will be awarded and the new district officers will be installed.

And so, lift up your eyes unto the hills on September 28, 1968.

## **Program**

### GROVE PARK INN, ASHEVILLE SEPTEMBER 28-30, 1968

### Saturday, September 28

4:00	Executive Committee Meeting
4:00- 6:00	Registration—Lobby
6:00- 7:30	Cocktail Party—Green Room (Semi-formal)
8:00-12:00	Dinner Dance—Laurel Room

### Sunday, September 29

8:00-10:00	Golf Tournament—Asheville Country Club
3:30- 6:00	Registration—Lobby
4:00- 5:30	Table Clinics—Laurel Room
5:30- 6:30	Cocktail Party—Reception—Green Room
6:30- 8:30	Buffet Dinner—Plantation Room
8:30-10:30	Business Meeting—Laurel Room

### Monday, September 30

8:00- 9:00	New Members Breakfast—Francis Marion Room
9:00-12:00	Registration—Lobby
9:30-12:30	Dr. Gordon J. Christensen-Laurel Terrace
	(with coffee break at 10:30).
1:00- 2:00	Luncheon with Auxiliary—Installation of Officers

### Table Clinics

### Sunday, September 29

4:00-5:30 p.m.

- 1. Restoring Very Badly Broken Down Teeth, Kenneth M. Ray, Asheville.
- 2. Interceptive Orthodontics for the General Practitioner, James H. Taylor, Asheville.
- 3. Time Savers, Robert H. Owen, Jr., Asheville.
- **4. Regaining Space with Simple Space Maintainer,** S. L. Woody and T. F. Blume, Gastonia.
- 5. Custom Trays for Full Denture Impressions, Robert B. Litton, Shelby.
- 6. Fast and Accurate Crown and Bridge Impression Technique, Carey T. Wells, Jr., Canton.
- 7. X-ray Technique, T. George Johnson, Jr., Morganton.
- 8. The Treatment of Locked Anteriors, Jerry Gunter, Gastonia.
- 9. Medications for the Apprehensive Patient, W. G. Quarles, Gastonia.
- 10. New Full Denture—Closed Mouth Technique, George I. Miller, Clyde.

## Essayist



Gordon J. Christensen, D.D.S., M.S.D. Denver, Colorado

Dr. Christensen is professor of dentistry and planning consultant for the Colorado College of Dentistry. Until August 1, 1968 he was chairman and associate professor in the department of restorative dentistry at the University of Kentucky.

A native of Logan, Utah, he received a DDS degree from the University of California at Los Angeles in 1960 and an MSD degree in restorative dentistry from the University of Washington in 1963.

Dr. Christensen has written many articles for dental publications and has been the recipient of several grants and fellowships. He served in the U. S. Army and is a member of a host of professional societies.

Monday, September 30

9:00 a.m.-12:30 p.m.

## RESEARCH AND CLINICAL TECHNIQUES RELATED TO SILVER AMALGAM, RESIN SYSTEMS, AND CAST GOLD RESTORATIONS

Research information will be integrated with the clinical techniques related to these commonly used dental treatments. Recent information concerning new conventional amalgams, spherical alloys, triturating devices, composite and acrylic resins, castings procedures, finishing cast gold restorations, cementing agents, bases and liners and other subjects will be covered. Questions and discussion are encouraged throughout this presentation.

## Second District Dental Society



W. Stewart Peery President

## Fourth Annual Tar Heel Dental Seminar

WHAT DO YOU want from a district convention? If it's:

Top flight clinicians for your own professional advancement . .

Entertainment and relaxation, plus . . .

Fellowship with your friends from neighboring communities . . . You will find them at the completely redecorated White House Inn, Charlotte. September 22-24, 1968. With your support the fourth annual Tar Heel Dental Seminar can be the most successful ever.

Our principal clinicians, Dr. Charles Heartwell and Dr. Wilbur Eames, are renown men in the dental profession. Dr. Heartwell's unique teaching technique, using three projectors simultaneously, and his program on denture construction have received rave notices from all those privileged to see them. Dr. Eames has done more than any other person in the last half century to improve the quality of amalgam restorations, through his work with "dry mix" alloys. The variety of table clinic subjects and the strong emphasis on occlusion in projected clinics should prove quite informative.

Careful scheduling of this year's business sessions allowed Sunday and Monday evenings to be reserved almost exclusively for pleasure and entertainment. Our traditional social hour on Sunday evening will be followed by a banquet featuring scrumptuous cuisine, plus the most humorous and delightful entertainer in the South today—Mr. Edmund Harding. On Monday evening, a gourmet's delight and a stage production by a professional cast will await us as we take a twenty minute bus trip to the Village Dinner Theater.

Can you afford to miss the fun?

### Tar Heel Dental Seminar

Sponsored by

## THE SECOND DISTRICT DENTAL SOCIETY OF NORTH CAROLINA

## WHITE HOUSE INN, CHARLOTTE SEPTEMBER 22-24, 1968

Sunday,	September	22
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11:00	Registration—Main Lobby
1:30- 2:45	Table Clinics—Independence Hall, Section "A"
3:00- 4:15	Projected Clinics—Independence Hall, Section "A"
4:15- 5:00	Opening Business Session—Independence Hall, Section "A"
	Necrology Service
	Election of New Members
6:00- 7:15	Social Hour—Mezzanine-Ballroom
7:30	Banquet—Capitol Ballroom
	Induction of New Members
	Speaker: Mr. Edmund Harding, Humorist-Philosopher,
	Washington, N. C.

### Monday, September 23

8:30

Registration—Lobby

9:00-10:30	Dr. Heartwell—Independence Hall, Section "A"
	"The Road to Successful Complete Dentures"
10:30-10:45	Coffee
10:45-12:15	Dr. Heartwell—Independence Hall, Section "A"
12:15-12:45	Business Session—Independence Hall, Section "A"
	Election of Officers
12:45- 2:00	Business Luncheon—Capitol Ballroom
2:00- 3:30	Dr. Eames—Independence Hall, Section "A"
	"Eames Technique in Amalgam"
3:30- 3:45	Coffee
3:45- 5:00	Dr. Heartwell—Independence Hall, Section "A"
	"The Surgical Preparation of the Mouth"
6:15	Bus Departure to Village Dinner Theatre, Matthews
7:00	Dinner
8:00	Installation of Officers
8:15	Curtain Time!

### Tuesday, September 24

8:00

0.00	Tiew Members Breaklast Schate Room Meb
8:30	Registration—Lobby
9:00-10:30	Dr. Eames—Independence Hall, Section "A"
10:30-10:45	Coffee
10:45-12:15	Dr. Heartwell—Independence Hall, Section "A"
	"Constructions That Are Natural in Appearance"
12:15	Adjournment

New Members Breakfast—Senate Room A&R

## Essayist



Wilmer B. Eames, D.D.S. Atlanta, Georgia

Monday, September 23 Tuesday, September 24 2:00 p.m.

9:00 a.m.

Dr. Eames, the author of many published scientific papers, a lecturer on operative dentistry and the science of dental materials before many major dental organizations throughout this country, is currently Professor of Operative Dentistry at Emory University School of Dentistry.

His distinguished career, marked by his practice of general dentistry in Colorado, his service as a Major in the Dental Corps, and his clinical investigations in dental materials, resulted in a previous appointment at Northwestern University as Professor of Operative Dentistry and Associate Dean.

### EAMES TECHNIQUE IN AMALGAM

Evaluation of all commonly used materials and techniques, of condensation, conservative cavity preparation and pulp protection, practical techniques, and an analysis of common amalgam failures will all be realistically related to a central theme—OPTIMUM RESULTS CAN ONLY BE EXPECTED BY PROPERLY PREPARING THE CAVITY AND MATRIX TO RECEIVE A PROPORTIONED PROPER RATIO AMALGAM FILLING MATERIAL.

## Essayist



Charles M. Heartwell, Jr., D.D.S. Richmond, Virginia

Monday, September 23

Tuesday, September 24

9:00 a.m., and 3:45 p.m. 10:45 a.m.

Dr. Heartwell, with a background in both the private practice of general dentistry and in the specialty of prosthodontics, plus a career in the Dental Corps of the U. S. Navy, is at present professor of prosthodontics at the Medical College of Virginia School of Dentistry, director of maxillofacial prosthodontics, M.C.V., consultant to the Board of Oncology, M.C.V. Hospital, and author of the text "Syllabus of Complete Dentures."

#### THE ROAD TO SUCCESSFUL COMPLETE DENTURES.

Theme: what procedures are followed, what materials are chosen to carry out these procedures, and why.

THE SURGICAL PREPARATION OF THE MOUTH FOR COMPLETE DENTURES.

THE CONSTRUCTION OF COMPLETE DENTURES THAT ARE NATURAL IN APPEARANCE.

#### **Table Clinics**

#### Sunday, September 22

1:30 p.m.

- 1: When Not to Extract, Bruce A. Gustafson, Winston-Salem.
- 2. Motivate the Patient, Joseph D. Stewart, Winston-Salem.
- 3. Aluminum Shell Technique in Impression-taking, W. H. Snider, Spencer.
- 4. Nitrous Oxide—Oxygen Analgesia, Bruce A. Ketner, Salisbury.
- 5. To be announced, Thomas R. Collins, Winston-Salem.
- 6. The T. M. Joint, Donald C. Evans, Charlotte.
- 7. To be announced, Central Piedmont Community College.
- 8. To be announced, Central Piedmont Community College.
- 9. Causing Unerupted Teeth to Erupt, Clarence F. Biddix, Charlotte.

# Third District Dental Society



President
Maurice B. Richardson

# Emphasis: Human Communications

The 1968 Meeting of the Third District will be in Southern Pines at the Mid Pines Club. We feel that we have an excellent program planned. Sunday we will have a golf tournament, social hour, banquet, and business meeting. For Monday we have secured one of the top men in the field of human communications, Dr. Russell Haney, Ph.D. of Sherman Oaks, California. Many of you will remember his program for the North Carolina Society of Dentistry for Children in Greensboro several years ago.

Your arrangements committee and officers have been working hard to make this an excellent meeting. You all come and work, study, and play with us.

## **Program**

# MID PINES CLUB, SOUTHERN PINES OCTOBER 6-7, 1968

Sunday,	October	6
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9:00	Golf Tournament—Mid Pines
1:00- 5:00	Registration
5:30- 6:30	Social Hour
7:00	Banquet
8:30	Opening Session
	President's Address
	Report of Secretary-Treasurer
	Committee Reports
	Reading of changes in Constitution and Bylaws
	Election of Officers
	Election of Candidates for Membership

#### Monday, October 7

7:30 8:00- 1:00	Breakfast for new members Registration
	Table Clinics
10:30	"Basic Factors in Human Communication"
	Dr. Russell Haney, Sherman Oaks, California
12:30	Business Luncheon
	Committee reports
	Report on President's Address
	Old and new business
	Charge to new members
2:00	"Practice Management Aspects of Human Communications"
	Dr. Russell Haney, Sherman Oaks, California
4:00	Final Business Session
	Installation of officers
	Awarding of prizes

## **Table Clinics**

#### Monday, October 7

9:00-10:00 a.m.

- 1. Clinical Evaluation of Composite Resin Materials, C. L. Sockwell, Chapel Hill.
- 2. Total Patient Care: An Experiment in Dental Education, Clifton E. Crandell, Chapel Hill.
- 3. Immediate Full Denture Restorations, Frank E. Gilliam, Burlington.
- 4. Maxillo-Facial Prosthesis, M. T. Wood, Chapel Hill.

## Essayist



Russell Haney, Ph.D. Sherman Oaks, California

Dr. Haney is a practicing psychologist with a special interest in communication, learning theory, speech pathology, and psychodiagnosis. He received his undergraduate degree at the University of California at Santa Barbara and his MA and PhD degrees from the University of Southern California. He has lectured widely throughout the United States to a variety of professional groups on the psychology of human communication.

Monday, October 7

10:30 a.m.

BASIC FACTORS IN HUMAN COMMUNICATION

Monday, October 7

2:00 p.m.

PRACTICE MANAGEMENT ASPECTS OF HUMAN COMMUNICATION

# Fourth District Dental Society



Penn Marshall, Jr. President

## Something For Everyone

To all members of the North Carolina Dental Society I wish to extend a most cordial invitation to attend the forty-eighth annual meeting of the Fourth District Dental Society. Our meeting will be held in Raleigh this year at the new Statler-Hilton Inn, October 12-14, 1968. The committees responsible for this year's arrangements have done an excellent job, and a most interesting program is in store for those of you who might join us.

This year, the Fourth District has three outstanding clinicians from the Naval Dental School, Bethesda, Maryland, in the fields of operative, periodontic, and oral surgery. Commander Julian J. Thomas, Jr. will lecture on operative; Captain Peter F. Fedi, Jr. will discuss periodontics, and Captain Howard B. Marble, Jr. will speak on oral surgery. Later in the afternoon, all three will be involved in a round table discussion at which time questions will be answered.

From the following program you can see that there is "something" for all, and we hope that many of you will be with us in October.

## **Program**

#### STATLER-HILTON INN, RALEIGH OCTOBER 12-14, 1968

#### Saturday, October 12

3:00- 7:00	Registration—Dr. Henry O. Lineberger, Jr., chairman
4:30	Clinic Committee Meeting—Dr. Roy L. Earp, chairman
5:30	Executive Committee Meeting—Dr. Joseph M. Johnson, chairman
6:30	Social Hour—Dr. D. W. Seifert, Jr., chairman
7:30	Banquet—Dr. Glenn F. Bitler, chairman
9:00-12:30	Dance—The Joe Harper Band

#### Sunday, October 13

9:00-11:00	Golf Tournament—McGreagor Downs—Dr. David B. Mas-
	ters, chairman
11:00	The Raleigh Churches welcome you to their services
12:00- 6:00	Registration desk open
1:00	New Members Luncheon—Dr. John N. Denning, chairman
4:00- 5:30	Table Clinics—Dr. Roy L. Earp, chairman
5:30	Social Hour
6:30	Buffet Dinner
7:30	Golf Prizes
8:00	First General Session

#### Monday, October 14

8:00- 1:00	Registration desk open
8:30	Program—Dr. P. C. Purvis, chairman
	Commander Julian J. Thomas, Jr., D.C. U.S.N.
	Captain Peter F. Fedi, Jr., D.C. U.S.N.
	Captain Howard B. Marble, Jr., D.C. U.S.N.
12:15	Lunch
1:30	Commander Thomas, Captain Fedi, Captain Marble
4:00	Second General Session
	Installation of Officers
	Adjournment

#### Essayists







CAPT. MARBLE

CAPT. FEDI

CMDR. THOMAS

All three essayists are from the Naval Dental School, National Naval Medical Center, Bethesda, Maryland.

Captain Howard B. Marble, Jr., is head of the oral surgery department He is a graduate of Tufts University Dental School, and a diplomate of the American Board of Oral Surgery.

Captain Peter F. Fedi, Jr., is head of the periodontics department. He is a graduate of the University of Pennsylvania School of Dentistry and is a diplomate of the American Board of Periodontology.

Commander Julian J. Thomas, Jr., is a member of the operative dentistry department staff. He is a graduate of the University of Tennessee School of Dentistry and was in private practice in Nashville before entering the service.

Monday, October 14

8:30 a.m. and 1:30 p.m.

#### CURRENT CONCEPTS AND NEW DEVELOPMENTS

The general theme of the morning and afternoon programs presented by Captain Marble, Captain Fedi and Commander Thomas will be current concepts and new developments in the fields of oral surgery, periodontics, and operative dentistry. Their discussions will be directed toward the practical application of this information in the everyday practice of dentistry.

#### Table Clinics

Sunday, October 13

4:00-5:30 p.m.

- 1. Positive Retention for Full Lower Dentures, William F. Grimes, Fayetteville; James R. Mertz and William T. Schadel, VA Hospital, Fayetteville.
- 2. Pin Reinforced Resin Restorations for Fractured Permanent Anterior Teeth, Burton A. Horwitz, Raleigh.
- 3. Orthodontic Consideration for Congenitally Absent Permanent Teeth, William G. Schneider, Raleigh.
- **4. Temporary Restorations for Crown and Bridge Prosthetics,** William J. Sherwood, Jr., Raleigh.
- 5. A New Concept for Periodontal Packs, T. Edwin Perry, Raleigh.
- 6. Construction of Space Maintainers and Space Maintenance, Henry S. Zaytoun, Raleigh.
- 7. An Efficient Recall System, Mrs. Reandy Clement, CDA, Raleigh.

# Fifth District Dental Society



M. W. Aldridge President

## By the Sea!

The Fifth District is again having its annual meeting at the Blockade Runner on Wrightsville Beach. Tom Fleming has secured a most interesting program on periodontics. Dr. Emile Fisher from Atlanta, Georgia is the main attraction.

Garland Holmes, chairman of arrangements this year, has devoted much time and effort to see that this is our greatest meeting ever. There will be adequate time for fun and foolishness as well as dental education.

You are urged to make your room reservations early so that you may have your preference of ocean side or sound side. Be sure and bring your wives, and we would urge you to invite your auxiliary personnel as well.

See you there!!!

## **Program**

# BLOCKADE RUNNER MOTOR HOTEL, WRIGHTSVILLE BEACH SEPTEMBER 15-16, 1968

#### Sunday, September 15

11:00	Executive Committee Meeting
12:00- 6:00	Registration
3:00- 5:00	Table Clinics—Nighthawk Room
4:00	Ladies Auxiliary Meeting—Committee Room
5:30	Social Hour—Patio
6:30	Banquet—Robert E. Lee Room
	Master of Ceremonies—Dr. Z. L. Edwards, Jr.
	Invocation—Dr. W. H. Gray, Jr.
	Welcome—Luther T. Rogers, Mayor, Wrightsville Beach
	Introduction of Guests—Dr. David H. Freshwater
8:30	General Session
	Call to Order—Dr. M. W. Aldridge
	Necrology Service—Dr. Carle W. Mason, Jr., Presiding
	Minutes of Last Meeting and Secretary-Treasurer's Re-
	port—Dr. James L. Cox
	President's Address—Dr. M. W. Aldridge
	Presentation of New Members—Dr. Walter S. Linville, Jr.
	Nominating Committee Report—Dr. Zeno L. Edwards,
	Jr.
	Election of Officers

#### Monday, September 16

8:00 8:30-10:00	New Member Breakfast Registration
9:00-12:00	"Stop That Periodontal Abuse"—Dr. Emile T. Fisher,
40.00	Atlanta, Georgia
12:00	Luncheon
1:00- 3:00	Dr. Emile T. Fisher, Atlanta, Georgia
3:00	Final Business Session
	Committee Reports
	Report on President's Address
	New Business
	Installation of Officers
	Adjournment

## Essayist



Emile T. Fisher, D.D.S. Atlanta, Georgia

Dr. Fisher is a graduate of Emory University School of Dentistry and received an M.S.D. in periodontics from Northwestern University. He is chief of the periodontal section of Ben Massell Dental Clinic in Atlanta and is a diplomate of the American Board of Periodontology.

#### STOP THAT PERIODONTAL ABUSE $- PI + D^{T}N = LT$

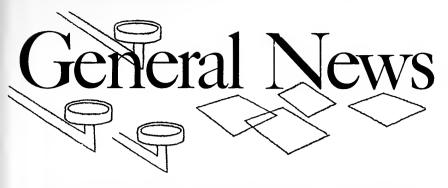
These lectures are designed for the general practitioner who wishes to become more proficient in understanding and treating periodontal diseases. They will include diagnosis, etiology and therapy involved in treating the average case in the routine practice of dentistry.

Along with the use of visual aids and an 1800-foot movie on periodontal surgery, there will be a discussion of patient orientation and management.

#### Table Clinics

Monday, September 16 Sunday, September 15 9:00 a.m. and 1:30 p.m. 3:00-5:00 p.m.

- 1. Information Concerning the Dental Hygiene and Dental Assisting Program at Wayne Community College, J. Fred Sproul, Goldsboro.
- 2. Utilization of Dental Hygienists, Fifth District Dental Hygienists Association and Southeastern Dental Hygienists Study Club.
- 3. Guidelines for Hiring Dental Auxiliary Personnel, Walter S. Linville, Jr., Wilson.
- 4. Vestibular Fold Extension, R. A. Carnevale, Goldsboro.
- 5. X Bite Correction, Eastern North Carolina Orthodontic Study Club, J. H. Chesson, Rocky Mount.
- **6. Photography in Dentistry**, C. T. Barker, New Bern and Thomas C. Boykin, Goldsboro.
- 7. Pedodontics, George Mayo.



#### GROUP DISABILITY PLAN GUARANTEED RENEWABLE

The group disability insurance program sponsored by the North Carolina Dental Society and administered by the J. L. Crumpton Agency of Durham will be guaranteed renewable to age 70 effective with the next anniversary date in December, 1968. Dr. J. S. D. Nelson, chairman, Insurance Committee in making the announcement of the conversion said:

"While we have had no problems to arise since this program was initiated in 1943, we feel this new guarantee greatly strengthens the program and provides our membership with complete assurance that their protection will continue in full

effect for members to the age of 70.

"The new plan has been under study for a number of months. The Insurance Committee unanimously approved it and subsequently the Executive Committee and the North Carolina Department of Insurance both approved the policy contract. It is our feeling that this new program is a sound and solid achievement for our members.

"The J. L. Crumpton Agency has been authorized to proceed with furnishing each member with all details and to implement the new coverage as soon as practical to do so."

#### Secretary-Treasurer Dies

Dr. L. D. Herring of Raleigh, who was elected secretary-treasurer of the Society at the annual session in Pinehurst in May, died May 14, one week after being elected.

The day after his election he suffered a heart attack and was hospitalized at Moore County Hospital.

Following Dr. Herring's death, President Colin P. Osborne Jr., issued the following statement:

"To honor the memory of Dr. L. D. Herring, newly installed

secretary-treasurer of the North Carolina Dental Society, whose untimely death occurred on May 14, 1968, there will be no immediate appointment to fill his unexpired term. The Executive Committee at its meeting following the close of the annual session in Pinehurst authorized Dr. C. W. Poindexter to serve as acting secretary-treasurer.

"On the advice of our attorney and the Constitution and Bylaws Committee I have decided on the

following procedure. I have asked the Nominating Committee of the Fourth District to meet and suggest nominees to be presented to the Executive Committee for its consideration. Dr. Joseph M. Johnson, chairman, has agreed to place this item on the agenda when we meet at Holly Inn in Pinehurst, August 3."

#### Dr. Willis Re-elected

Dr. Guy R. Willis of Durham has been elected to succeed himself for a three year term as a member of the North Carolina State Board of Dental Examiners. Elected to the Board to succeed Dr. Wade H. Breeland of Belmont was Dr. Thomas G. Collins of Raleigh. The terms of the Board members begin August 1.

Other members of the Board are: Dr. C. C. Diercks of Morganton, Dr. R. B. Barden of Wilmington, Dr. S. L. Bobbitt of Raleigh, and Dr. Freeman C. Slaughter of Kannapolis.

Dr. Breeland leaves the Board after serving for twelve years.

Officers of the Board for the coming year effective August 1 are Dr. Slaughter, president, and Dr. Diercks, secretary-treasurer.

#### Dr. Medlin to Head Delegation

Dr. Erbie M. Medlin of Aberdeen will serve as chairman of the delegation from North Carolina to to the House of Delegates of the American Dental Association when it convenes in Miami Beach October 28-31, 1968. He succeeds as chairman Dr. Paul E. Jones of Farmville, who has been a delegate to the ADA since 1931.

Dr. E. U. Austin of Charlotte will

be serving as a delegate for the first time. He succeeds Dr. C. C. Poindexter of Greensboro.

Vice chairman of the delegation is Dr. Ralph D. Coffey of Morganton who has been a delegate to the ADA since 1961 and was recently elected to serve for a third term. Dr. Roy L. Lindahl of Chapel Hill is secretary of the delegation.

The other member of the six man delegation is Dr. Colin P. Osborne, Jr., of Lumberton, president of the Society.

#### Group Overhead Expense Insurance

A group overhead expense insurance plan underwritten by Mutual of Omaha has been approved by the Insurance Committee and the House of Delegates and will be made available to members late this summer.

A dentist who becomes disabled and unable to work will be able to draw up to \$100 a month for the payment of rent, utilities, taxes, and stationery, accounpostage, tant's services and other office opexpenses, including salaries of employees. Premiums for this program may be used as a direct business expense for tax deduction.

Dr. J.S.D. Nelson, chairman of the Insurance Committee, made this comment on the new program: "The need for this coverage was expressed by something over a hundred members in response to an inquiry in the Newsletter. After considering several other plans, the Insurance Committee agreed that Mutual of Omaha offered a plan which was most suitable and applicable to the membership."

#### NCDAA District Meetings

The North Carolina Dental Assistants Association has issued an open invitation to all members and non-member dental assistants to attend its district meetings this fall. The dates and sites of the meetings follow.

First District, September 29, Asheville

Second District, September 22, Charlotte

Third District, October 6, Southern Pines

Fourth District, October 13, Raleigh

Fifth District, September 15. Wrightsville Beach.

#### New VA Fee Schedule

A new dental fee schedule for services performed for beneficiaries of the Veterans Administration in North Carolina became effective July 1, 1968. It replaces the old schedule which has covered dental care for veterans since 1959.

Copies of the new schedule have been mailed to all dentists in the State, according to Dr. F. I. Spengler, chief, dental service, at the VA Regional Office in Winston-Salem.

New regulations governing dentists participating in the VA program have been announced by Dr. Spengler. He stated that it would no longer be necessary for a dentist to submit form 10-2718 which required approval by the Society. A dentist may now apply directly to the regional office in Winston-Salem indicating he desires to participate in the program and agrees to accept the fees published in the new schedule.

Dr. Spengler indicated that the VA will approve any ethical licensed dentist willing to accept the fee

schedule, and he emphasized that a veteran has freedom of choice in selecting a dentist.

#### Dentists Subject to Jury Duty

Dentists will be automatically included on jury lists under provisions of statutes revised by the 1967 General Assembly. Exemptions for more than 30 special categories were deleted by legislation which declared that "jury service is the solemn obligation of all qualified citizens," and that excuses can "be granted only for reasons of compelling personal hardship or because requiring service would be contrary to the public welfare, health, or safety."

When summoned for jury duty, a dentist, in order to be excused, must appear before the chief district judge (or a judge designated by him) at the time and place when applications for excuses will be heard.

By law, the district judge is the only one who can grant anyone exemption from jury duty.

#### Dentists Aid in Cancer Fight

A statewide program conducted by private dentists resulted in a 62 per cent increase in the number of early oral cancer cases detected between 1963 and 1965, according to an official of the dental health division of the State Board of Health.

Miss Becky Bowden, coordinator of the three-year program, reported to the Board of Directors of the Wake County Unit of the American Cancer Society "it is hoped every dentist's chair in North Carolina would be a cancer detection center."

She noted oral cytology is an effective means of diagnosing cancer lesions, but most dentists in North Carolina are not aware of cytology

as a diagnostic aid.

Miss Bowden said 34 seminars had been held across the State to demonstrate the cytology techniques, conducted by the Dental Division of the State Board of Health, the N. C. Division of the American Cancer Society, the UNC Dental School, and North Carolina Society of Pathologists.

Dentists were shown at the seminars how to scrape the lesions and prepare slides to send to pathologists for examination.

The seminars were attended by 65 per cent of the 1,250 practicing dentists in the State.

#### N.C. Dentists Elected

Two North Carolina dentists have been elected officers of the Southern Conference of Dental Deans and Examiners.

Dr. James W. Bawden, dean of the UNC School of Dentistry at Chapel Hill is the Conference president. Dr. Freeman C. Slaughter of Kannapolis, a member of the State Board of Dental Examiners is vice president.

#### Dr. Suggs Named Chairman

Dr. Joseph R. Suggs has been named chairman of the Randolph County Board of Health. He is a former member of the Asheboro City Board of Education for 12 years. Currently he is serving as president of the Randolph County Dental Society.

#### First in U.S.

The first program in dentistry in the U. S. to be funded under the federal Regional Medical Programs began operating in North Carolina on July 1.

The program is based at the University of North Carolina School of Dentistry and will be conducted in cooperation with the state's three medical schools.

The cost for the first three years will be about \$230,000.

The N. C. Regional Medical Program encompasses heart, cancer, stroke and related diseases.

Dr. James W. Bawden, dean of the UNC dental school and chairman of a special committee which drafted plans for the new dental program, said the general purpose of the program is "to insure that as many patients as possible who suffer from one of the diseases included in the N. C. Regional Medical Program will receive appropriate dental care as a part of their comprehensive treatment."

He said, also, that efforts will be made to expand and improve the participation of the state's dental profession in patient care in community hospitals.

Dr. Bawden said the first year of the three-year program will be devoted to developing a series of continuing education activities and studying dental facilities in community hospitals.

Five to 10 community hospitals will be selected to participate in a pilot program in continuing education for dentists and physicians.

In the second and third years, the continuing education program and the study of dental facilities will be coordinated into a full-fledged functioning program.

The special committee which submitted the dental program under the N. C. Regional Medical Program found that appropriate dental care

was not being provided to many patients suffering from the six disease categories covered by the statewide federal program.

"The provision of such care," the committee pointed out, "will require that steps be taken to improve the consultative and cooperative efforts between the medical and dental professions, particularly in the community hospital environment."

The committee stressed the need for physicians to be aware of the serious complications which might arise from neglecting the oral tissues and the need for dentists to treat patients with appropriate knowledge of their medical conditions and the limitations imposed by these conditions.

The dentist's role in the comprehensive care of patients with heart disease, cancer, stroke, diabetes, bleeding diseases and kidney disease are emphasized in the proposed dental program.

North Carolina is one of only about a dozen regions with an operational heart, cancer and stroke program. It is the first with an operational dental program included in the overall program.

#### 68 Dentists Licensed

Sixty-eight dentists and 55 dental hygienists were licensed to practice in North Carolina as a result of examinations given in June, according to an announcement released by the State Board of Dental Examiners July 15.

Licensed to practice dentistry were: Walter J. Aiken, Jr., Rockingham; John C. Angelillo, Durham; Larry E. Baucom, Charlotte; Cyrus W. Bazemore, Jr., Raleigh; Robert A. Bingham, Lexington; William G. Bradford, Jr., Colliersville, Tenn.; Joseph S. Burnham, Jr., Pensacola, Fla.; William F. Bussey, Jr., Severn, Md.; James J. Cabe, Brevard; Dewey G. Carter, Burlington; Hubert B. Clapp, Swannanoa; Eddie N. Clark, Chapel Hill; James R. Dimsdale, Cramerton; Robert H. Dixon, Durham; James C. Elliott, Jr., Asheville; Stanley McN. Farrior, Wilmington; Michael P. Folck, Chicago, Ill.; James F. Fulp, Jr., Chapel Hill; Jim R. Fuqua, Eden; Alan B. Gordon, Danbury; Morris H. Griffin, Chapel Hill; Carole N. Hildebrand, Washington, D. C.

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Also, James B. Newman, Chapel Hill; Karl O. Pierce, Jr., Charleston, W. Va.; Harold E. Plaster, Jr., Shelby; Henry W. Ridout, Durham; Theodore M. Roberson, Chapel Hill; Dennis B. Russell, Hope Mills; William C. Satterfield, Chapel Hill; Frank W. Shelton, Jr., Durham; Johnny R. Stike, Wilmington; Arthur C. Stone, Alexandria, Va.; James F. Stonestreet, Albemarle; Frank P. Stout, Chapel Hill; H. L.

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Licensed dental as hygienists were: Gloria D. Adderton, Charlotte; Joanne L. Allen, Durham; Mary I. Anderson, Charlotte; Elizabeth H. Bentley, Charlotte; Donnie Brothers, Greensboro; Harriett S. Buchanan, Gastonia; Virginia L. Bullard, Greensboro; Linda L. Burke, Durham; Linda E. Clapp, Winter Park, Florida; Patricia A. Cline, Charlotte; Susan T. Combs. Asheboro; Patricia C. Craig, Cameron, S. C.; Nancy N. Crisp, Charlotte; Rebecca S. Dilling, Gastonia; Teresa K. Dowdy, Durham; Barbara L. Flake, Badin; Elizabeth A. Franklin, Morganton; Ellen L. Gowens, Pfafftown; Daryl L. Gurley, Mechanicsville, Va.

Also, Glenda M. Hastings, Sophia; Shirley E. Hickam, Albemarle; Dianne L. Howell, Washington; Jamene L. Hunter, Enfield; Mary J. Hollingsworth, Asheboro; Jo Anne Livingston, Dover, Del.; Mary V. Long, Candler; Susan T. Lundblad, White Plains, N. Y .; Sue C. Lynch, Greensboro; Marjorie C. Madans, Charlotte; Roberta H. Martin, Charlotte; Susanne McDonald, Fayetteville; Jewel A. McLaughlin, Charlotte; Rachel E. Miller, Lawndale; Judy L. Millspaugh, Hickory; Sarah F. Nance, Charlotte; Thelma J. Patterson, Charlotte; Helen C. Patton, Morganton; Linda E. Ritch, Charlotte. Also, Patricia G. Shoemake, Val-

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# Welfare Dental Program Expanded

An expanded program of dental care for welfare recipients was approved by the State Board of Welfare on July 10, subject to approval by the Advisory Budget Commission. The program will become effective October 1, 1968 and will cost the State an estimated \$1.27 million for the rest of this fiscal year.

Currently only emergency palliative treatment, extractions, fillings, and repairs to dentures are provided MAA, OAA and APTD recipients. Under the new program they will also be eligible for diagnostic services, periodontal services, and full and partial dentures. Dentists providing these services will be requested to bill the State on the basis of their usual, customary, and reasonable fee. Reimbursement will be according to the State Agencies Dental Fee Schedule adopted October 1, 1967.

The Advisory Budget Commission is expected to consider the program shortly.

# News briefs from . . . North Carolina Dental Hygienists' Association



Seventy-two members, fifty-seven junior members, and three guests attended the 21st annual session of the North Carolina Dental Hygienists' Association held in Southern Pines May 6-7, 1968. Greetings from the North Carolina Dental Society were presented to the group George Kirkland, Dr. Also, greetings were extended by advisor, Dr. M. W. Carpenter. Attending this annual session and contributing to the program was the District VI Trustee, Mrs. Etta Mae Wirt.

On May 6, "Expanded Duties of the N. C. Dental Hygienist" was the topic of Dr. William D. Strickland's address. He demonstrated by slides a simple, correct method of polishing amalgam restorations. Guest speaker, Dr. Marvin Chapin, spoke on "A Team Approach to Mandibular Prognatism" which related to the surgical method of correction of his dental problem. Dr. Joseph Stewart entertained at the President's Luncheon held at the Mid-Pines Club.

Dr. Joseph Porter of Charlotte on May 7, spoke on "Post-Chest Carliac Massage and Mouth to Mouth Resuscitation" and its value in the some and office.

The membership elected the following officers for 1968-1969:

#### Jackelyn K. Morris, President

Formerly Jackelyn Mae Kelly of Kinston, graduated from UNC School of Dental Hygiene in 1960. Active in NCDHA for 7 consecutive years, she worked in private practice 8 years. She is married to Dr. Thomas Allison Morris, a graduate of UNC School of Dentistry in 1960. They have two sons, six years and one year old and live in Asheville.



JACKELYN K. MORRIS

#### Priscilla Levine, President-Elect

Priscilla is originally from Long Island, N. Y. She graduated in 1960 from the State University at Farmingdale, Long Island, N. Y. She worked in private practice from 1960 to 1964 in New York. She is now working for Dr. Charles A. Reap, Jr. of Chapel Hill, and is married to Michael Levine who is now attending UNC Law School. She has been active in NCDHA since moving to this state in 1964.

#### Hope Anderson, Vice President

Hope is originally from Bluefield, West Virginia. She is a 1953 graduate of West Liberty State College in West Virginia. She has worked in private practice in Greensboro, Chapel Hill, and Durham and is married to William D. Anderson, Jr. They have three children and reside in Chapel Hill. Bill is Vice President of North Carolina National Bank, and Hope is practicing part-time in Durham.

#### Pam Euliss, Secretary

Pam is originally from Graham. She attended Queens College for a year, then transferred to UNC and received a certificate in dental hygiene in 1965. Her first job as hygienist was in New Bern. She is now working in Durham and plans to continue her education toward a B.S. degree this fall.

#### Sally Rose, Treasurer

Sally Rose graduated from UNC in 1962. She worked in Raleigh for

3 years following graduation. She has been living in Charlotte for the past three years. Her husband, John, works for First Union National Bank. They are expecting their first baby in June, 1968.

Margaret Cain was elected a delegate to the national meeting and Pattie Smittle an alternate delegate.

A revision of the Procedures Manual was completed for a more efficient and effective organization.

The NCDHA went on record in support of appropriate legislation to require the necessary adjustment of the fluoride content of public water supplies to assure a supply of water with properties that will be effective in reducing the incidence of dental caries.

A "lunch break" was held at UNC School of Dentistry on March 23, 1968 for State Board candidates and Examiners. Hostesses were: Hope Anderson, Priscilla Levine, Gail McLean, and Carolyn Williams.

Courtesy cards to foster membership in the state and national organizations were given or sent to UNC, Wayne, and Guilford students in mid-May. District II of NCDHA gave a tea Sunday, May 26, honoring the Dental Hygiene Class of 1968 of Central Piedmont Community College. It was held at the YWCA in Charlotte. Pat Hutchinson gave out courtesy cards to these students then.

In closing this session President Carolyn Williams announced the October 27-31 meeting dates of the ADHA in Miami Beach, Florida.

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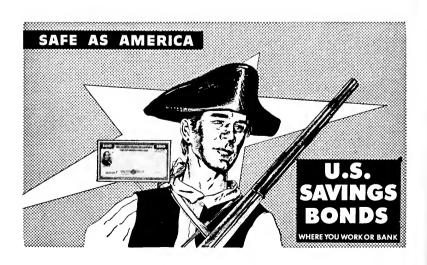
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References: 1. Hiatt, W. Local anesthesia; history; potential toxicity; clinical investigation of mepivacaine. Dent. Clin. North America p. 243 July 1961. 2. Ross, N.M. and Dobbs, E.C. Mepivacaine HCI (Carbocaine). J. Oral Surg. Anes. & Hosp. D. Serv. 21:215, May 1963.

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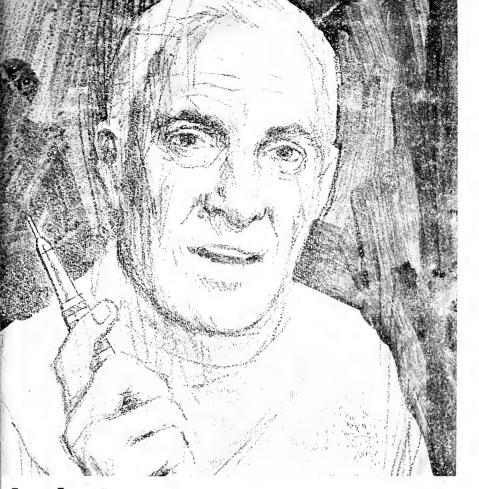
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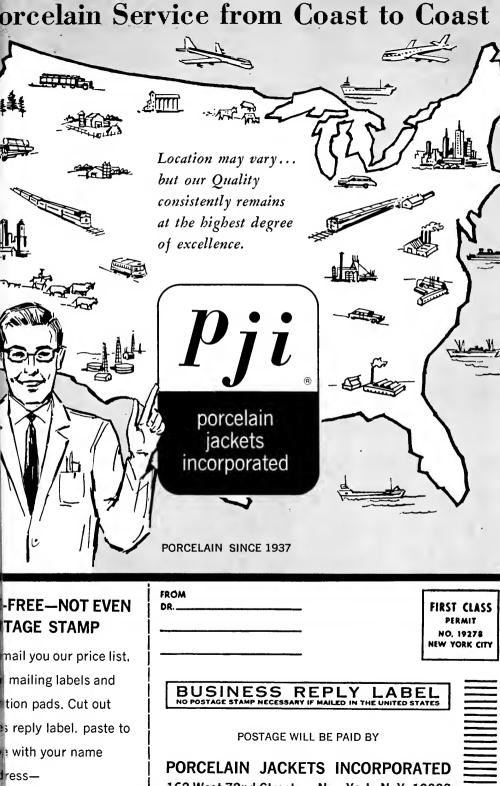
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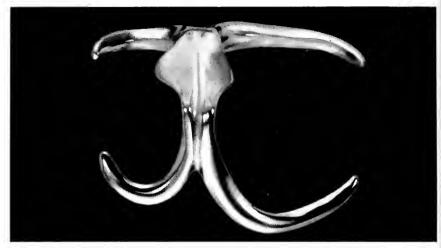
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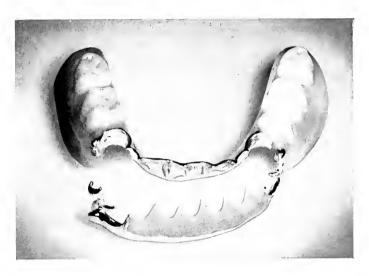
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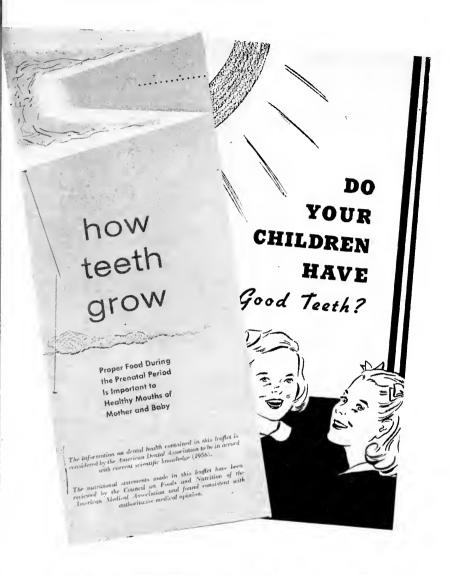
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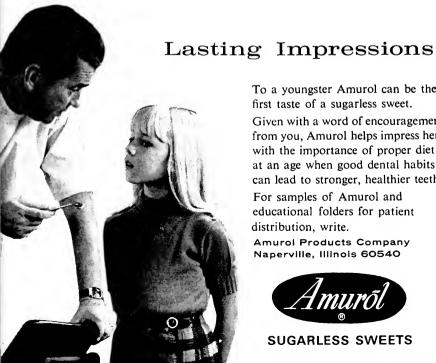
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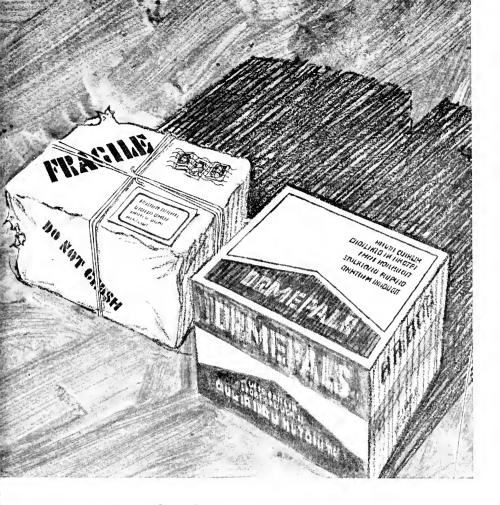
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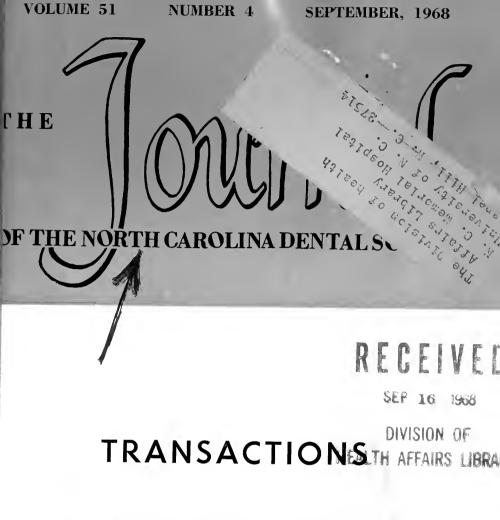
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112TH ANNUAL SESSION

May 5-8, 1968



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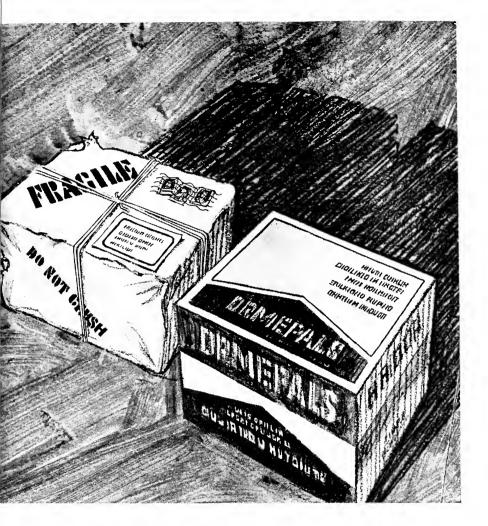
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## THE JOURNAL

## of the

## North Carolina Dental Society

A Constituent of the American Dental Association

Containing the

## TRANSACTIONS

of the

## 112th ANNUAL SESSION

THE CAROLINA — PINEHURST, NORTH CAROLINA

May 5-8, 1968

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### **OFFICERS 1967-68**

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## SPEAKER OF THE HOUSE



### EXECUTIVE COMMITTEE

Frank G. Atwater, D.D.S. (1970), Chairman	Greensboro
S. H. Isenhower, D.D.S. (1968)	Newton
L. B. PEELER, D.D.S. (1969)	Charlotte
J. Homer Guion, D.D.S. (1968)	Charlotte

## EXECUTIVE SECRETARY

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## This issue is dedicated to the memory of . . .



Livious Duncan Herring, D.D.S. Raleigh, North Carolina 1914-1968

It is fitting that this issue of The Journal be dedicated to the memory of a man who gave so much of himself to dentistry.

Born in Roseboro, North Carolina, Livious attended Wake Forest College and received his D.D.S. degree from the Medical College of Virginia. He unselfishly devoted a great part of his life to organized dentistry, always striving to elevate the profession he loved.

The offices he held were many, including the presidency of the Raleigh Dental Society and the Fourth District Dental Society. He was a member of the Southern Academy of Oral Surgery and was honored as a fellow of the American College of Dentists. At the time of his passing, Livious held the office of secretary-treasurer of the North Carolina Dental Society.

His memory will long inspire the minds and hearts of all of us who knew him.

## Report of the President

George F. Kirkland, Jr. Durham

First, I want to thank this organization for the privilege of serving as your president. I cannot say that there have not been some work and problems attached to the job, but I can truthfully say that I have gotten much more out than I have put in. I have been the real beneficiary in any case.

I have been most fortunate in selecting committee chairmen who have been willing to work and who should get the credit for any accomplishments that we have made during the past year. Also, only those who have passed this way before me can completely appreciate what the Central Office staff does to ease the burden of the Society officers and executive members. Without singling anyone out, I want to thank each and everyone of you who have helped me make this a successful year for our North Carolina Dental Society.

This has been an interesting and active year for our Society. We have completed most of our assignments and made much headway on those we have not completed.

Our Committee on Dental Care Programs finally accomplished something we have wanted to do for years. They negotiated with the different State Agencies—School Dental Health, Commission for the Blind, Public Welfare and Vocational Rehabilitation—for a fee schedule which was more in keeping with present times and one in which the dentists of the State could willingly participate.

Our TV Career Committee was one of the most active committees during my year. Under the auspices and sponsorship of the North Carolina Association of Professions, our Society through this committee produced a thirty-minute tape to be shown on educational TV. The title of this production was "Discover Dentistry," and was first shown on Channel 4, March 8 this year. This tape was produced with high school and college students in mind, to encourage them to enter either the profession of dentistry or one of the auxiliary fields—dental hygiene, dental assisting or laboratory technology. This committee deserves a lot of thanks for the many hours of work, time, and thought that went into this highly professional job.

The Dental Practice Act Committee has been kept busy all this year. The resolutions by the American Dental Association followed by similar ones by the North Carolina Dental Society requesting that we instruct the State Board of Dental Examiners to change our dental practice laws so that auxiliaries can be delegated additional functions, has placed tremendous demands on this committee. This committee has accomplished much this year in this direction.

Our Society had right much to do in getting the Governor to appoint a dentist to the Advisory Council on Comprehensive Health Planning for the State of North Carolina. This was necessary if dentistry was going to participate in State or Federal programs.

The Dental Task Force which was appointed by the previous administration to work with the Regional Medical Program on Heart, Cancer and Stroke received an approval of funds for about \$232,000 for continuing education. This will enable us to undertake a continuing educational program to improve dental care provided to patients included under the Regional Medical Program, and to upgrade and expand the activities of the dental profession in community hospitals throughout the State. It is the first Regional Medical Program dental grant in the United States, and places the North Carolina Dental Society and the School of Dentistry in a position of true leadership.

I could go on listing other activities and achievements, but I shall leave this to committee reports which you may hear in the House of Delegates or read later. I only intended to cover some of the highlights.

Anyone who has been active in dentistry knows that we are on the threshold of major changes which will affect the lives and practices of all practicing dentists. Those of us now in active practice may be considered the last frontier in dentistry as we know it today. Most of us like conditions to stay the same. Most of us are afraid of change. But changes we must face.

One of the major trends of modern society has been the move to provide health services, and this includes dentistry, to all its citizens. As it was in the past when our nation felt that all our people were entitled to public education as a means of raising our standard of living and preparing us for a more useful and productive life, so it is now that our government feels that the conservation and improvement of health of all our citizens should be provided. A healthy populace represents a major natural resource. Good health on a national level also is a means of raising our standard of living and making us more useful and productive citizens.

The Social Security Act in the United States was passed in 1935, and since that time there has been a movement to provide better health for all. The Amendments to this Act, Title XVIII and Title XIX in 1965, made way for Medicare and Medicaid. Title XVIII, Medicare, has already been enacted and most citizens over sixty-five, widows with young children and the disabled are getting health benefits under this program. Dentistry was not involved to any extent by this Amendment. However, with the enactment of Title XIX and other Federal programs dealing with antipoverty, it became apparent that dentistry was on the threshold of becoming immensely involved. Our leaders in dentistry, realizing this major trend toward more federally sponsored and financed dental care, wisely developed the now well-known Dental Health Program for Children, which was presented and adopted by the American Dental Association House of Delegates in 1966 at their annual meeting. This was a program that they felt met the obvious deficiency in dental health and also one that the profession could accept and work under with some enthusiasm. They realized that our profession was going to become involved in some program whether we liked it or not. Also, they did not want our profession to repeat the experience that the medical profession had in their long battle with the government over Medicare.

Many think the Dental Health Program for Children will eventually make dentistry available to all school children regardless of their ability to pay. Ten pilot projects were to be started in 1967. Now the administration's 1968 decision is to support only two. It seems that our Dental Health Program is going to be hampered by our government's austerity movement at the present. This, however, is expected to be only a temporary delay.

Already the dentists in this State are involved in numerous Federal and State funded programs—Head Start, Office of Economic Opportunity, School Health, Public Welfare, Vocational Rehabilitation, Commission for the Blind, Old Age Assistance and Medical Aid to Aged. In some cases the programs are so un-co-ordinated that there is duplication, and some recipients are being called in under more than one program for the same dental care. One of the objectives of our Society's State Planning Committee is through study and planning to eliminate such waste, both in money and manpower, and to co-ordinate the functions of all these publicly funded programs. The members of this committee have a big task ahead of them in devising a plan for us to participate in Title XIX. I might add they have already made much progress in this direction.

Another trend that is going to change the character of the practice of dentistry is the expansion of prepaid dentistry from the private sector. We may not subscribe to the philosophy of prepaid dentistry. However, we must face the fact that more people are going to avail themselves of dental services when funds are furnished by either government or private sources. Many industries have added dental care as a fringe benefit. Labor unions are also demanding more dental care for their members in negotiating new contracts with management. Insurance companies handling health insurance are becoming more interested in providing dental care along with other medical services. There is a strong demand by the public for prepaid dentistry. The Blues—Blue Shield and Blue Cross—have informed us, the North Carolina Dental Society, that they would like our co-operation in forming a policy to include dental care coverage in their health insurance. They would like our help, but are going to initiate a policy without it if necessary. Our Committee on Dental Care Programs has been meeting with the Blues and I feel something worth-while and satisfactory to our Society will be the result. If even a part of the government programs develop, and even if prepaid dentistry does not prove as acceptable as some believe, the demands on dental manpower are going to be great, if not tremendous, in the forthcoming years.

This brings up a question. How can the dentist under present conditions which prevail in the practice of dentistry today meet these increasing demands? Certainly it cannot be done by increasing the number of dentists. We can neither provide the educational facilities, nor recruit enough qualified students. As someone has so aptly stated "the battle to provide" needed dental care by providing more dentists has been lost." The American Dental Association, in looking toward the future and realizing that the dentist alone cannot provide future needs, has recommended that all constituent dental societies have their state boards of examiners change the dental practice laws so that dental auxiliaries can be allowed to perform more functions as a means of solving this predicted dental manpower shortage. These recommendations were made along with the approval of the Dental Health Program for Children, because without expanded functions for dental auxiliaries this program as proposed could not be carried out. The North Carolina Dental Society already has a committee, the Dental Practice Act Committee, which has been working on this problem and made substantial headway towards this goal. We should have a report by this committee completed and a resolution ready for the House of Delegates to act upon at this meeting. I do urge the Dental Practice Act Committee to do everything it can and the House of Delegates to do what is necessary to expedite these recommendations passed down to us from the American Dental Association calling for the expanded use of auxiliary personnel.

As Arnold Toynbee, English sociologist and economist has stated, "To try to halt change is to court an explosion. The constructive way of dealing with the inevitability of change is to make changes voluntarily before they impose themselves. The earlier we take action, the wider will be our range of choice." The American Dental Association has met this situation head on by adopting the Dental Health Program for Children. Our con-

stituent society must follow its recommendations to meet the changes that are going to take place in the forthcoming years. No longer can we isolate ourselves from government plans or prepaid programs. Individualistic as most of us may be, we still must face these socialistic trends. Rather than blindly resisting such a strong movement or refusing to participate, we must be prepared and be ready to help devise programs under which we can practice and still be proud of our profession.

#### Resolutions

This report is informational in nature and no resolutions are presented.

## Report of the Secretary-Treasurer

C. W. POINDEXTER Greensboro

#### NORTH CAROLINA DENTAL SOCIETY

AUDIT FOR FISCAL YEAR ENDED MAY 31, 1968

The Officers and Directors North Carolina Dental Society

We have examined the balance sheets and related statements of receipts and disbursements for the General Fund, Relief Fund and Development Fund, together with supporting schedules, of the North Carolina Dental Society for the year ended May 31, 1968. Our examination was made in accordance with generally accepted auditing standards applicable to accounts maintained on the cash basis and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

Inasmuch as the records are maintained on the cash basis of accounting, income earned but not received and liabilities incurred but not paid, if any, are not reflected in the accompanying financial statements.

In our opinion, the accompanying financial statements present fairly the financial position of the North Carolina Dental Society at May 31, 1968, and the results of its cash transactions for the year then ended, on a basis consistent with that of the preceding year.

June 21, 1968

General Fund:

## LYNCH AND McMillan

#### INDEX

Exhibit A Exhibit B Exhibit C	Balance Sheet Analysis of Changes in Surplus Statement of Cash Receipts and Disbursements
Relief Fund:	
Exhibit D	Balance Sheet
Exhibit E	Statement of Cash Receipts and Disbursements
Exhibit F	Balance Sheet
Exhibit G	Statement of Cash Receipts and Disbursements
Capital Fund:	
Exhibit H	Balance Sheet

## General:

Exhibit 1	Combined Balance Sheet
Schedule 1	U. S. Treasury Bonds
Schedule 2	1968 Annual Session Expenses

### **EXHIBIT A**

## GENERAL FUND BALANCE SHEET—MAY 31, 1968

	170	
	100	

Cash:		
Checking account—First-Citizens Bank &		
Trust Co., Raleigh, North Carolina		\$ 15,026.98
Savings accounts:		
North Carolina National Bank,	e c104 =0	
Raleigh, North Carolina First-Citizens Bank & Trust Co.,	\$ 6,134.53	
Raleigh, North Carolina	7 634 87	
Raleigh Savings & Loan Association,	1,054.01	
Dalaigh North Carolina	10.902.42	
First Federal Savings & Loan Association,	,	
First Federal Savings & Loan Association, Durham, North Carolina	10,703.22	35,375.04
U. S. Treasury Bonds at cost (maturity value \$1,675.00)—Schedule 1		1 000 00
\$1,675.00)—Schedule 1		1,206.00
Total		\$ 51 608 02
		=======================================
SURPLUS		
<b>Appropriated:</b> Reserve for Library and History Committee	¢ 1 600 00	
Dental Service Corneration \$ 5,000,00	\$ 1,000.00	
Less expended to date 1.391.47	3 608 53	\$ 5,208.53
Reserve for Library and History Committee		φ 0,200.00
Unappropriated:		
Balance—May 31, 1967	42,112.02	
Add revenue receipts in excess of expense		
disbursements—Exhibit B	4,287.47	46,399.49
		\$ 51 608 02
Total		\$ 51,608.02
		\$ 51,608.02
		\$ 51,608.02 EXHIBIT B
Total  GENERAL FUND		EXHIBIT B
Total  GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR		EXHIBIT B
Total  GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR		EXHIBIT B
Total  GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR  MAY 31, 1968  Revenue receipts:	R THE YEA	EXHIBIT B
GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR MAY 31, 1968  Revenue receipts: Total receipts—Exhibit C	R THE YEA	EXHIBIT B R ENDED
Total  GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR  MAY 31, 1968  Revenue receipts:  Total receipts—Exhibit C  Less: cost of matured bonds	R THE YEA	EXHIBIT B  R ENDED\$118,372.46 234.00
GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR MAY 31, 1968  Revenue receipts: Total receipts—Exhibit C	R THE YEA	EXHIBIT B  R ENDED\$118,372.46 234.00
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GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR MAY 31, 1968  Revenue receipts: Total receipts—Exhibit C Less: cost of matured bonds.  Net revenue receipts.  Expense disbursements: Total disbursements—Exhibit C Less—non-expense disbursements: Re-invested interest and dividends \$1,522.85 Transfer of funds \$1,522.85 Transfer of funds \$325.00 Reserve fund disbursements: Dental Service Corporation 612.31 University of North Carolina	R THE YEA	EXHIBIT B  R ENDED \$118,372.46 234.00\$118,138.46
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GENERAL FUND  ANALYSIS OF CHANGES IN SURPLUS FOR MAY 31, 1968  Revenue receipts: Total receipts—Exhibit C Less: cost of matured bonds.  Net revenue receipts.  Expense disbursements: Total disbursements—Exhibit C Less—non-expense disbursements: Re-invested interest and dividends \$1,522.85 Transfer of funds \$1,522.85 Transfer of funds \$325.00 Reserve fund disbursements: Dental Service Corporation 612.31 University of North Carolina	\$117,457.97	EXHIBIT B  R ENDED\$118,372.46 234.00\$118,138.46

### GENERAL FUND

## STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS FOR THE

## YEAR ENDED MAY 31, 1968

Receipts:	01,	2000	
Dues and penalties		\$100,021.50	- 1
Annual session		11,372.50	
Journal		4,701.49	
Expense reimbursements Savings account interest and divide		342.62	
Savings account interest and divide	ends	1,522.85	- 1
Insurance dividend			
Matured bond		325.00 82.50	
Matured bond Sales—formularies and histories			
Total receipts			\$118,372 46
Disbursements:			- 1
Dues remitted:			
American Dental Association\$			
A.D.A. Relief Fund	1,404.00		
First District	2,425.00		
Second District	1,555.00		
Third District	2,830.00		
Fourth District	1,895.00		
Fifth District	1,014.00	e =0 =01 =0	
Refunds	73.50	\$ 58,581.50	1
Administrative expenses:			- 1
Salaries and payroll taxes\$	25,537.77		
Office rent	4,463.40		
Office supplies	881.62		
Office machine maintenance	344.30		
Telephone	874.44		
Postage	644.76		
Travel—executive secretary	1,338.95		
Insurance	235.01		
Newspaper clipping service	110.00		
City and county taxes Miscellaneous	106.78 $48.42$	34,585.45	
Miscellaneous	40.42	34,303.43	
Publications:			*
Journal\$	6,766.20	7 110 55	
Newsletter	347.35	7,113.55	
Committees and conferences:			
Children's Dental Health\$	14.75		- 1
Council on Dental Health	104.08		
Dental Care Programs	84.10		
Dental Practice Act	170.60		
Reimbursement of officers and			
delegates	2,693.32	0.041.05	
District Officers' Conference	175.00	3,241.85	
Other:			
Annual session—Schedule 2\$	8,569.55		
Legal counsel	146.55		
Dental Foundation of North			
Carolina, Inc.	160.00		
American Fund for Dental	100.00		
Education	100.00		
Audit	300.00		
Television tapes	350.00		

Fifth Trustee District\$	266.52		
National Association of Dental			
Service Plans North Carolina Association of	150.00		
Professions Memberships	$200.00 \\ 45.00$		
Miscellaneous	41.02	\$ 10,328.64	
Non-expense disbursements: Transfer of funds\$	325.00		
Dental Service Corporation Committee	612.31		
Reinvested interest and dividends	1.522.85		
University of North Carolina Dental Student Loan Fund.	1,146.82	3,606.98	
Total disbursements Excess of receipts over disbursemen Bank balance—May 31, 1967	ts		\$117,457.97 914.49
Bank balance—May 31, 1967			14,112.49
Bank balance—May 31, 1968—Exhil	bit A		\$ 15,026.98
			EXHIBIT D
	EF FUND		
BALANCE SHEET	Г—МАУ 31	1, 1968	
Cash:	ETS		
Checking account—North Carolina Bank, Raleigh, North Carolina—	National		o 177 14
Savings accounts:		•	\$ 177.14
First Federal Savings & Loan As Durham, North Carolina		\$ 10.319.75	
First Citizens Bank & Trust Co., North Carolina	Raleigh		99 199 90
			22,138.28
Certificates of deposit: First Union National Bank, Rale	igh. N. C	.\$ 8.302.97	
First-Citizens Bank & Trust Co Raleigh, N. C.	••	5,000,00	
North Carolina National Bank			
Raleigh, N. C		10,940.00	$24,\!242.97$
U. S. Treasury Bonds at cost (mat value \$1,500.00)—Schedule 1	turity		1,080.00
Total		***************************************	\$ 47,638.39
cupi	or ric		
Balance—May 31, 1967 Excess of disbursements over rece	ipts—Exhib	oit E	\$ 40,233.41 \$ 5,648.82
Total		••••	\$ 34,584.59
Add: Transfer to savings account. Reinvested interest and divide	S	\$ 12,500.00	, ,
Total Less: Cost of matured bonds		\$ 14,043.80	
		990.00	$13,\!053.80$
Total			

## EXHIBIT E

## RELIEF FUND

## STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS FOR THE

			1
YEAR ENDED MAY 31, 1968	8		
Receipts:	4.055.05		
A. D. A. Relief Fund	943.00		
Matured bonds	1,375.00		
Auxiliary Scrap Amalgam Drive	1,575.05		
Total receipts	•	\$	8,571.02
Disbursements:			
A. D. A. Relief grants\$ Transfer of funds\$	100.00		
Transfer of funds	12,500.00		
Legal fees	1,543.80		
Total disbursements			14.219.84
			1
Excess of disbursements over receipts—Exhibit D Bank balance—May 31, 1967			5,825.96
Bank balance—May 31, 1968—Exhibit D			
		ΞΞ	
DEVIET OBMENIO DUND		EX	HIBIT F
DEVELOPMENT FUND		EX	HIBIT F
DEVELOPMENT FUND  BALANCE SHEET—MAY 31, 19	968	EX	HIBIT F
BALANCE SHEET—MAY 31, 1	968	EX	HIBIT F
	968	EX	HIBIT F
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G		EX	HIBIT F
BALANCE SHEET—MAY 31, 15  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	255.83	EX	HIBIT F
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G\$ Savings accounts—First Federal Savings & Loan Association, Durham, N. C	255.83 3,936.21		
BALANCE SHEET—MAY 31, 15  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	255.83 3,936.21		
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G\$ Savings accounts—First Federal Savings & Loan Association, Durham, N. C	255.83 3,936.21		
BALANCE SHEET—MAY 31, 12  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G\$ Savings accounts—First Federal Savings & Loan Association, Durham, N. C	255.83 3,936.21	\$	4,192.04
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	255.83 3,936.21	\$	4,192.04
ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G\$ Savings accounts—First Federal Savings & Loan Association, Durham, N. C	255.83 3,936.21	\$	4,192.04
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	255.83 3,936.21	\$	4,192.04
BALANCE SHEET—MAY 31, 19  ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	255.83 3,936.21	\$	4,192.04
ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G	3,744.17 1,000.00	\$	4,192.04
ASSETS  Cash: Checking account—First Union National Bank, Raleigh, North Carolina—Exhibit G\$ Savings accounts—First Federal Savings & Loan Association, Durham, N. C  Total  SURPLUS  Reserve for permanent improvements: Balance—May 31, 1967	3,744.17 1,000.00	\$	4,192.04

.....\$ 13,140,36

477.39 15.00

10.00

1.422.29

#### EXHIBIT G DEVELOPMENT FUND STATEMENT OF CASH RECEIPTS & DISBURSEMENTS FOR THE YEAR ENDED MAY 31, 1968 Receipts: Transfer from savings account......\$ 1,000.00 Total receipts \$ 1.283.38 Disbursements: Moving expenses .....\$ 128.00 Millwork in central office.... 828.00 Furniture and equipment..... 3.182.78 Installation of equipment..... 580.60 Office accessories ..... 124.79 Reinvested interest 183 38 Total disbursements 5.027.55 Excess of disbursements over receipts..... 3,744.17 Bank balance, May 31, 1967 4.000.00 Bank balance, May 31, 1968—Exhibit F..... 255.83 EXHIBIT H CAPITAL FUND BALANCE SHEET—MAY 31, 1968 ASSETS Furniture and equipment at cost......\$ 11,718.07 SURPLUS Invested in fixed assets: 9.957.58 2 conference tables @ \$241.02 each...... 2 plastic mats @ \$37.08..... 74.161 plastic mat..... 49.44 9 walnut chairs @ \$26.78 each..... 241.02 1 electric typewriter 431.20 1 electric adding machine..... 317.16 1 electric typewriter 1 electric clock 398.20 21.60 $\frac{58.91}{72.03}$ $72.03 \\ 329.60$ 2 table lamps @ \$40.17 each..... 80.34 walnut bookcase 59.12 3.182.78

Balance .

Less equipment disposed of during year:

1 electric typewriter \$ 225.00 1 electric typewriter \$ 445.00 1 electric adding machine \$ 249.90

Total ......\$ 11.718.07

1 electric typewriter 1 Oak desk

1 flashlight pointer .....

<b>EXHIBIT</b>	I

## ALL FUNDS COMBINED BALANCE SHEET, MAY 31, 1968 ASSETS

ASSETS	
Cash:Checking accounts\$ 15,459.Savings accounts51,449.Certificates of deposit34,242.	.53
U. S. Treasury Bonds at cost (maturity value \$3,175.00).  Office furniture and equipment at cost	
Total	\$115,156.52
SURPLUS	
Appropriated:	
General fund \$5,208 Development fund 4,192	.53 .04 \$ 9,400.57
Invested in fixed assets:	
Capital fund	11,718.07
Unappropriated:	
General Fund       \$ 46,399         Relief fund       47,638	

#### SCHEDULE 1

....\$115,156.52

## SCHEDULE OF U. S. TREASURY BONDS MAY 31, 1968 GENERAL FUND

#### Date Maturity Serial Number Acquired Cost Date Value Nov., 1956 18.00 Nov., 1968 25.00 Q60612J Nov., 1956 Nov., 1956 Nov., 1968 25.00 Q60613J 18.00 Q60614J 18.00Nov., 1968 25.00 Nov., 1968 100.00 Nov., 1956 72.00C169985J Nov., 1968 Nov., 1968 Nov., 1956 500.00 D22068J 360.00 M178508Nov., 1956 720.001,000.00 Total-Exhibit A \$1.206.00 \$1,675.00

	R	ELIEF FUND		
${f D22067J} \ {f M178507J}$	Nov., 1956 Nov., 1956	$\begin{array}{c} \$ & 360.00 \\ 720.00 \end{array}$	Nov., 1968 Nov., 1968	\$ 500.00 1,000.00
Tota	l—Exhibit D	\$1,080.00		\$1,500.00

### SCHEDULE 2

8.569 55

### GENERAL FUND

### SCHEDULE OF 1968 ANNUAL SESSION EXPENSES

SCHEDULE OF 1968 ANNUAL SESSION	EXPENS:	ES	
Arrangements Committee:			
Stenotypist \$ Housing January meeting Registration Presentations Transportation of equipment Printing Signs Staff lodging and meals Coffee breaks Telegrams Projection equipment rental.	790.95 100.00 139.32 416.90 45.93 144.42 401.70 86.52 76.89 360.28 9.00 18.54		
Special services	154.50	\$	2,744.95
Exhibits Committee:			
Door prizes \$ Refunds \$ Printing \$ Social hour \$ Exhibit space Decorator \$ Special services	381.46 52.50 47.95 244.76 400.00 857.48 20.00		2,004.15
Entertainment Committee:  Banquet \$ Reception \$ Dance Lawn party	193.78 392.12 275.00 375.00		
Entertainment	150.00		1,385.90
Necrology Committee			9.27
Program Committee			1,902.50
Hospitality Committee			25.75
Publicity Committee			251.49
Clinic Committee			91.00
Visual Education Committee			4.47
House of delegates			150.07
			-

Total—Exhibit C.....\$

## Report of the Executive Secretary

Andrew M. Cunningham Raleigh

This is the thirteenth annual report of your Executive Secretary. I have endeavored to fulfill my responsibilities during the past year as specified in Article XV, Section 8 of the Bylaws.

It has been a busy year. Judging by the reports of the standing and special committees it has also been a productive year for organized dentistry in this State. In this report I shall comment on some of the highlights.

New Central Office: May 26 was moving day. All records, equipment, new Central Office: May 26 was moving day. All records, equipment, and furniture were transferred to our new quarters at 120 East Peace Street. But it was not quite that simple. Many days were spent in preparation for the move so that it could be accomplished with minimum interruption of service to the Society and it paid off.

The most time consuming task was the purging of records and files so that storage space in the new office would be economically and efficiently used. Non-essential correspondence was destroyed. This reduced the amount of storage space required Valuable papers and records.

duced the amount of storage space required. Valuable papers and records of historical importance were carefully preserved.

The new quarters are attractive, but more important, they are proving functional. We are now occupying about 1,300 square feet, and, thanks to careful planning by Dr. Walter H. Finch, Jr., and his committee, every inch of space is usable and none is wasted.

In our former location we occupied about 1,100 square feet, but 200 square feet were dead storage space. Therefore, we actually gained ap-

The Conference Room was designed not only to accommodate committee meetings, but to provide working space and storage space. This is one example of just how functional the new Central Office is. The conference table will seat 20 comfortably. This is more than adequate for committee meetings. There is space enough in the room to accommodate even more if necessary, by using folding chairs.

The building is of colonial design with a brick exterior, built to our

specifications. We are proud that a utility company is planning a branch

office building which will be designed to duplicate ours.

The location on the Southwest corner of East Peace and North Blount streets is excellent. We are just four blocks North of the Governor's Mansion and the new Legislative Building.

The building has a total floor space of 2000 square feet. We occupy 1,300 square feet and the other 700 square feet are now occupied by the North Carolina Association for the Blind. They are proving to be excellent neighbors. Our lease is for five years with an option of an additional 5 years. Also, if we need to expand in the future, we will have first refusal on the lease of the additional 700 square feet, whenever it becomes available.

Membership: You will note from the report of the Membership Committee that we had 1,401 members as of December 31, 1967. The State Board of Dental Examiners reports that currently there are 1,575 licensed dentists in the State. That means that 89 per cent of licensed dentists in North Carolina are members of the Society. This compares very favorably with the national average of 82 per cent.

Tax on Unrelated Income: The Internal Revenue Service for the past several years has been taking a hard look at unrelated income of professional and trade organizations which are tax-exempt. This would include income from advertising in publications and from the sale of exhibit space at annual meetings.

Recently IRS issued regulations taxing advertising income from publications of otherwise tax-exempt organizations. At the present time it is our judgment that the new regulations should have little effect on advertising income from The Journal.

Last year the Society underwrote almost \$1,800 of the expense of publishing The Journal, and this did not include overhead expenses (salaries, rent, telephone, etc.). The Journal has never shown a profit for the past several years. Therefore, we think our tax exposure in this area will be negated, but we are carefully watching developments in the implementation of the regulations in other states.

As an extra precaution, changes in bookkeeping procedures are con-

templated which will further protect the Society from tax liability on

this item.

As for income from sale of exhibit space, the effect of the regulations is not clear. In 1964 IRS examined our books and gave us a clean bill of health as a tax-exempt organization. We do not expect to be taxed on this income in the immediate future, but of course IRS has a

habit of changing its mind with little or no prior notice.

We are also developing changes in bookkeeping procedures which will minimize our tax exposure here. Further, we are adhering to a policy of accepting exhibit contracts only from companies which offer services and equipment directly related to the dental profession. This should strengthen our position as a tax-exempt organization in the event IRS decides to examine our books again.

Collection of Dues: One of the responsibilities of the Central Office is the collection of District, State and ADA dues. About one-third of the

54 constituents in the ADA use this system.

We are proud of our record in this area over the years and we think we have developed an efficient and effective system which requires a minimum of administrative effort. This was confirmed in a survey of constituent society activities by the ADA in 1966 which showed that by March 31 we had collected 98.6 per cent of dues. Only Delaware had a better record of 98.8 per cent, a scant .2 per cent ahead of us. It should be noted that Delaware has no components and collection of dues, therefore, is a far less complicated problem.

In 1968 our dues collection record is even better. By the ADA deadline

date we had collected 98.95 per cent of dues.

Finances: In a day when fiscal responsibility is the exception rather than the rule (especially by governmental agencies), the Society maintains a remarkable record of fiscal responsibility. A study of income and expense during the past 10 years reveals that in only one year did expenses exceed income. This was in 1961 when we became involved in litigation.

In the 10-year period (1958-1967) total assets in the General Fund have increased from \$19,878 to \$49,080; total income from \$31,681 to

\$57,319; and total expenses from \$28,828 to \$55,025.

However, in this same period operating surplus (income in excess of expense) has decreased slightly from \$2,853 to \$2,294, indicating that although income has doubled in 10 years, expenses have risen according the statement of the statement of

ingly and less money has been made available for transfer to reserve. In 1958 the reserve in the General Fund was 67.5 per cent of operating expense. In 1967 it was 76.5 per cent. A generally accepted rule of thumb is that reserves should at least equal one year's operating expenses; two year's operating expenses is more desirable; and three year's operating expenses is optimal.

In 1967 the House of Delegates adopted a resolution curtailing, except in emergencies, any expenditure of reserve funds until the re-

serves equal operating expenses for one year.

The average annual operating surplus for the last 10 years is \$3.664. Unless unforeseen expenses crop up during the remainder of this fiscal year, we will show a better than average operating surplus for 1967-68 and our reserves should increase to 80-85 per cent of one year's operating expense.

Thanks: My personal thanks to State and District officers and committee chairmen for their unqualified co-operation during the past year which has made my job in the Central Office so much easier. I am most appreciative. I have enjoyed working for you and with you.

My personal thanks also to staff members at the Central Office. The demands upon you at times may have been burdensome. I am grateful

for your constant interest and willingness to get the job done right no matter what sacrifice of over-time was required.

Minutes

of

May 14, 1967

AUGUST 5, 1967

Executive Committee

JANUARY 6, 1968

JANUARY 7, 1968

JANUARY 28, 1968

FRANK G. ATWATER Chairman Greensboro

May 5, 1968

#### PINEHURST, NORTH CAROLINA

May 14, 1967

Call to Order: The Executive Committee convened in the Crystal Room of The Carolina, Pinehurst, North Carolina, Sunday, May 14. 1967. President Kirkland called the meeting to order at 8:35 a.m. Dr. Isenhower led in prayer.

Roll Call: Committee members present were: Drs. George F. Kirkland, Jr., C. P. Osborne, Jr., C. W. Poindexter, S. H. Isenhower, L. B. Peeler, and J. Homer Guion.
Staff members present were: Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, Central Office Secretary.
Dr. W. L. Hand, Jr., former Chairman of the Executive Committee and Chairman of the Dental Practice Act Committee was also present.

Introduction of New Members: Dr. Kirkland welcomed Dr. C. P. Osborne, Jr., newly-elected President-Elect to the committee. He noted with regret that the new Vice President, Dr. James H. Lee, was unable to be present because of illness.

He announced the appointment of Dr. Frank G. Atwater as a new member and Chairman of the Executive Committee. He explained that because of a prior commitment Dr. Atwater could not be present.

He noted with pleasure that Dr. C. W. Poindexter had been re-elected Secretary-Treasurer and would remain on the committee and that Dr. L. Hemor Chien immediate Page President, would continue to

that Dr. J. Homer Guion, immediate Past President, would continue to serve on the committee for another year.

Dr. Kirkland announced that Dr. Isenhower would serve as acting

Chairman of the committee for this meeting in the absence of Dr. At-

water.

Dr. Isenhower assumed the chair and presided for the rest of the meeting.

Editor-Publisher: Dr. Guion moved that Dr. A. Breece Breland be reappointed Editor-Publisher for the year 1967-68. Seconded by Dr. Peeler. Motion carried.

**Executive Secretary:** Dr. Poindexter moved that Mr. Andrew M. Cunningham be re-appointed Executive Secretary for the year 1967-68. Seconded by Dr. Guion. Motion carried.

**Appointments:** Dr. Kirkland announced that Dr. C. W. Poindexter would represent the Society at the State Secretaries Management Conference in Chicago, June 5-7.

Dr. Kirkland also announced that he had appointed Dr. Roy L. Lindahl as a delegate to the annual meeting of the National Association of Dental Service Plans in Chicago, June 10.

Out-of-State Travel for Executive Secretary: Dr. Guion moved that Executive Secretary Andrew M. Cunningham be authorized to attend the State Secretaries Management Conference in Chicago, June 5-7. Seconded by Dr. Kirkland. Motion carried.

Legal Counsel: Dr. Guion moved that the firm of Joyner & Howison be retained as legal counsel for the Society for 1967-68. Seconded by Dr. Kirkland. Motion carried.

1969 Annual Session: It was noted that the Society in General Session on May 11 voted to hold the 113th Annual Session in Pinehurst May 11-14, 1969.

Dr. Guion moved that these dates be confirmed with The Carolina. Seconded by Dr. Peeler. Motion carried.

**Budget Committee:** Dr. Kirkland announced the appointment of the following to the Budget Committee: Dr. Poindexter, Chairman; Dr. Peeler and Dr. Isenhower.

Central Office Services: Dr. Poindexter stated that the Central Office customarily performed addressing and mimeographing services on a cost basis for District Societies and other organizations. He pointed out that more and more organizations are requesting these services, and the demand on staff time is becoming a serious problem.

The Executive Secretary was requested to prepare and submit to the Executive Committee at its next meeting proposed guidelines for han-

dling requests for these services.

Reimbursement of Representatives: It was noted that the *Bylaws* provide that delegates and official representatives of the Society to conferences beyond the limits of North Carolina may be reimbursed first-class, round-trip air transportation and up to \$25 per diem for each day of official participation as a delegate or a representative. It was also noted that some representatives are reimbursed for certain expenses by the agency sponsoring the conference.

Dr. Guion moved that any reimbursement to a representative to a conference for travel or living expenses by the agency sponsoring the conference, be deducted from the amount of reimbursement for travel and living expenses he is due from the Society. Seconded by Dr. Poin-

dexter. Motion carried.

Out-of-Pocket Expenses for Editor-Publisher: Dr. Kirkland suggested that the Editor-Publisher be reimbursed for out-of-pocket expenses, including travel and per diem of \$15 for attendance at District Meetings. The suggestion was referred to the Budget Committee.

Dental Practice Act Committee: Dr. W. L. Hand, Jr., Chairman, Dental Practice Act Committee, reported that competent legal assistance would be required by the committee to properly complete its assignment. He requested that \$1,500 be allocated to the committee for the

employment of legal counsel during the next two years. The request was referred to the Budget Committee.

1969 Annual Session: Dr. Osborne announced that the scientific program of the 1969 Annual Session would be centered on General Dentistry and would include lectures on oral surgery, amalgam techniques, periodential and dental materials. He stated that suggestions for the program and would include lectures on oral surgery, amalgam techniques, perio-lontics and dental materials. He stated that suggestions for the program would be appreciated.

**Program 1968:** Dr. Kirkland requested that the same amount be allocated to the Program Committee for the 1968 Annual Session as was allocated for the 1967 Annual Session. The request was referred to the Budget Committee.

Relief Fund: It was noted that the reserve in the Relief Fund now otalled \$35,880 and that only \$225 in grants had been expended last

Dr. Kirkland reported that the Auxiliary was interested in diverting he proceeds from its annual Scrap Amalgam Drive to other worthwhile

projects and a committee had been appointed to study the matter.

Dr. Kirkland appointed Dr. Guion and Dr. Osborne to study all aspects of the use of relief funds, to confer with the Auxiliary on the matter, and submit its recommendations to the Francisco Confermance. natter, and submit its recommendations to the Executive Committee at ts next meeting.

Next Meeting: Dr. Kirkland suggested that the next meeting be held

that Meeting: Dr. Kirkiand suggested that the next meeting be held at Holiday Inn in Henderson on Saturday, August 5, at 2:00 p.m. and that he and Mrs. Kirkland would like to have the committee members and their wives for dinner that evening at their cottage on Kerr Lake. Dr. Poindexter moved that the next meeting be held on Saturday, August 5, at 2:00 p.m. at Holiday Inn in Henderson and that the invitation to dinner that evening by President and Mrs. Kirkland be accepted with thanks. Seconded by Dr. Osborne. Motion carried.

Adjournment: On motion by Dr. Guion, seconded by Dr. Peeler, and July carried, the meeting was adjourned at 9:45 a.m.

> C. W. POINDEXTER, D.D.S. Secretary-Treasurer

Read and approved: August 5, 1967

# HENDERSON, NORTH CAROLINA

#### August 5, 1967

Call to Order: The Executive Committee convened at Holiday Inn, Henderson, North Carolina, Saturday, August 5, 1967. Dr. Frank G. Atwater called the meeting to order at 2:10 p.m. Dr. Colin P. Osorne, Jr. led in prayer.

Roll Call: Committee members present were: Drs. Frank G. Atwater, George F. Kirkland, Jr., C. P. Osborne, Jr., J. Homer Guion, S. H. senhower, and C. W. Poindexter.

Staff members present were: Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, Central Office Secretary.

Approval of Minutes: Dr. Guion moved that the minutes of May 10, 1967 as corrected be approved. Seconded by Dr. Isenhower. Motion

earried. Dr. Isenhower moved that the minutes of May 14, 1967 be approved. Seconded by Dr. Guion. Motion carried.

Audit 1966-67: Dr. Guion moved that the audit of the Society's funds or the fiscal year ended May 31, 1967 as submitted by Lynch and McMillan certified public accountants, be approved. Seconded by Dr. Kirkland. Motion carried.

**Budget 1967-68:** Dr. Kirkland moved that the Budget of 1967-68 as proposed by the Budget Committee and amended by the Executive Committee be adopted. Seconded by Dr. Osborne. Motion carried. A copy is attached to these minutes.

The Budget as adopted includes the following allocations:

(1) An increase of 2.7 per cent in the Executive Secretary's salary which represents the increase in the Consumer Price Index of June 1, 1967 over June 1, 1966.

(2) An increase in the Central Office Secretary's salary to the level paid a State employee in a comparable position with equal number of

vears service.

(3) An allocation to the Editor-Publisher of \$350 for reimbursement of out-of-pocket expenses, office expense, and travel to District meetings.

(4) An appropriation of \$350 to the North Carolina Association of Professions for the production of a TV film on careers in dentistry.

Insurance Industry Liaison Committee: It was noted that the Insurance Industry Liaison Committee, acting under a directive of the 1966 House of Delegates, had notified the Health Insurance Council that it was prepared to serve as a review committee to assist the Council in evaluating claims for dental services submitted to the Council for review, and that the committee had not received a reply. Dr. Guion moved that the Insurance Industry Liaison Committee be authorized to pursue this matter further in compliance with the resolution adopted by the 1966 House of Delegates. Seconded by Dr. Isenhower. Motion carried.

Auxiliary Liaison: Dr. Guion reported that he and Dr. Osborne, at the request of the president, had studied all aspects of the use of relief funds and particularly the annual scrap amalgam drive by the Auxiliary in behalf of the Relief Fund. He pointed out that Relief Fund assets now totalled \$40,460.20 and currently there were no grants outstanding. He said that the Auxiliary had indicated a desire to divert the proceeds of its annual scrap amalgam drive for other purposes at least temporarily because the assets of the Relief Fund were apparently substantial and that there was very little demand for grants. Dr. Guion stated that he and Dr. Osborne agreed with the Auxiliary and that they would meet with representatives of the Auxiliary and suggest that at least a portion of the proceeds from the annual scrap amalgam drive be contributed for the time being to a loan or scholarship fund for dental students or dental hygiene students. Dr. Isenhower moved that the report be received for information. Seconded by Dr. Osborne. Motion carried.

1968 Annual Session: A report from Dr. Baxter B. Sapp, Jr., chairman, Program Committee, announced the following clinicians for the 1968 Annual Session: Dr. Rex Ingraham, University of Southern California School of Dentistry; Dr. Frank Scott, Jacksonville, Florida; and Dr. John Ott, Sarasota, Florida.

Dr. Sapp stated that the estimated cost of the program was \$1,862.70. Dr. Poindexter moved that the report be received for information.

Seconded by Dr. Isenhower. Motion carried.

Planning Committee for Dentistry: A report from Dr. E. A. Pearson, Jr., chairman, State Planning Committee for Dentistry, indicated that the committee had made significant progress in the development of a comprehensive dental health plan for North Carolina which will eventually become a component of the State Comprehensive Health Plan under Public Law 89-749. Dr. Pearson stated, however, that the committee needed the assistance of full-time resource administrative and clerical personnel in completing its project and that funds are not available from the State Planning Task Force for this purpose. He said that the committee did not feel that the Society was in a position to underwrite the employment of additional personnel. Therefore, the com-

nittee recommended that the Executive Committee consider applying for grant from the U. S. Public Health Service to the Society which would

rovide the necessary funds.

Dr. Poindexter moved that the Executive Committee approve the ecommendation of the State Planning Committee for Dentistry and hat the Society submit an application to the U. S. Public Health Service or a grant to support the work of the committee administratively and lerically. Seconded by Dr. Isenhower. Motion carried.

Dental Care Programs Committee: A report from Dr. E. U. Austin, hairman, Dental Care Programs Committee, stated that the committee n August 3, 1967 had appeared before representatives of State agencies dministering publicly funded dental care programs and had requested hat all agencies consider reimbursement on a usual and customary fee asis. Although the request was received with favor, it was brought ut that (1) funds for the 1967-69 biennium had been appropriated n the basis of the current fee schedules which precluded any apreciable increase in fees during the next two years; and (2) if the sual and customary fee concept was to be implemented some exerience would be necessary in order to estimate the cost to the State or budgetary purposes.

or budgetary purposes.

The State agencies proposed that: (1) a comparison study be conucted to develop a uniform fee schedule by September 1 and subnitted to the Budget Commission for approval; and (2) dentists for the 967-69 biennium be allowed to bill for services rendered on a usual nd customary fee basis, but that they be reimbursed according to a

niform fee schedule.

The information acquired through billing by dentists on a usual and ustomary fee basis will enable the Budget Commission to consider renbursement by this concept in preparing a budget for the 1969-71 iennium.

If and when the State agrees to reimburse dentists on a usual and ustomary fee basis a review committee is to be appointed by the Society

o assist the State in adjusting unusual or questionable claims.

It is anticipated that the proposal, if the Budget Commission aproves, can be made effective as early as October 1. In the interim, entists will be reimbursed on the basis of current fee schedules.

Dr. Osborne moved that the Dental Care Programs Committee be aunorized to continue its negotiations with State agencies according to he proposal outlined above and that the committee invite the chairnen of the Insurance Industry Liaison Committee, the Dental Service corporation Committee, the School Health Committee, and other appropriate committees to participate in future discussions with State gencies for purposes of communication and co-ordination. Seconded by Dr. Guion. Motion carried.

Central Office Services: Mr. Cunningham stated that to date he ad been unable to develop a satisfactory policy for handling requests the Central Office for addressing and mimeographing by District ocieties and other organizations.

Investment Committee: Dr. Poindexter pointed out that all reserve unds were now invested in bank savings accounts, building and loan ompanies, and U. S. Treasury Bonds, all of which yielded returns on a fixed-dollar basis.

Dr. Poindexter moved that the president appoint a committee to tudy the present policy of investing reserve funds and recommend hanges of investing reserve funds which would offset loss of income rom inflation. Seconded by Dr. Guion. Motion carried.

**President's Comments:** Dr. Kirkland thanked the committee memers for their interest and co-operation in administering the affairs of the Society.

He noted that Drs. James H. Lee, Lackey B. Peeler, and A. Breece

Breland were unable to attend this meeting because of prior commit-

He reported he had appointed a special committee to study the committee structure of the Society and that the committee is expected to complete its assignment this year.

He stated that Dr. Glenn F. Bitler, chairman, Publicity Committee, would be unable to attend the Conference on Public Relations in Chicago, August 7-8 and that Dr. J. Donald Kiser, a member of the committee, had agreed to attend.

He reported that Dr. William H. Oliver, chairman, Dental Assistants Committee, had been hospitalized because of an injury and would not be able to represent the Society at the Workshop on Dental Assisting Education in Chicago, September 28-30.

He announced that Dr. W. D. Strickland, a member of the UNC School of Dentistry, had agreed to head a committee to develop a TV film on a career in dentistry in co-operation with the N. C. Association of Professions. The film will be broadcast over educational TV stations. along with similar films produced by other member professional organizations.

He recommended that Society members be urged to join the N. C. Association of Professions on an individual basis.

He reported that the Dental Practice Act Committee would meet in Chapel Hill, September 23.

Dr. Kirkland invited committee members and their wives to join him and Mrs. Kirkland for dinner at their home on Kerr Lake following adjournment of this meeting.

President-Elect's Comments: Dr. Osborne reported that a member of the N. C. Association of Dental Laboratories was now on the board of directors of the National Association of Certified Dental Laboratories, and for the first time North Carolina dental laboratories have direct liaison with the national organization.

He stated that dental laboratories were still pressing for licensure as

a means of recognition.

Executive Secretary's Comments: Mr. Cunningham announced that the Internal Revenue Service had formally denied approval of the Relief Fund Indenture of Trust as a charitable organization under chapter 501 (c) (3) of the IRS Code and that the amendment to the Trust adopted by the 1967 House of Delegates had subsequently been filed with IRS. The amendment is expected to satisfy the requirements of IRS for approval of the Trust as a charitable organization.

He reported that the Society's legal counsel had conferred with attorneys of the insurance carrier of the proposed group retirement program to be administered by Financial Service Corporation of America concerning the trust agreement for the operation of the retirement fund. Changes suggested by our legal counsel will be incorporated in the Trust Agreement and submitted to the Securities Exchange Commission and the IRS for approval under provisions of the Keogh Act.

He reported that the Insurance Committee was conducting a survey to determine how many Society members would be interested in participating in a group overhead office expense insurance plan. If sufficient interest is expressed the committee will investigate and study proposals

by several carriers.

He announced that the dental hygiene program at Central Piedmont Community College had been fully approved by the ADA Council on Dental Education on May 25 and that the dental hygiene program at Guilford Technical Institute had received provisional approval on July 25.

Next Meeting: Dr. Poindexter moved that the Executive Committee meet Sunday, October 1, at 10:00 a.m., at Grove Park Inn, Asheville, during the annual meeting of the First District. Seconded by Dr. Kirkland. Motion carried.

Adjournment: The meeting was adjourned at 5:10 p.m. on motion by Dr. Poindexter, seconded by Dr. Osborne and duly carried.

C. W. Poindexter, D.D.S. Secretary-Treasurer

Read and approved: January 6, 1968

ESTIMATED INCOME

B

# **BUDGET 1967-68**

# Adopted August 5, 1967

Annual Carrier			10,880.00
Annual Session			4,800.00
Journal Expense Reimbursement			400.00
Interest and Dividends			1.525.00
interest and Dividends			1,525.00
Total estimated receipts		\$	58,975.00
SUDGETED EXPENSE			
Administrative			
1. Salaries & S. S.	\$ 26 597 00		
2. Office Rent			
3. Office Supplies			
4. Office Machine Maintenance			
5. Telephone			
6. Postage			
7. Travel			
8. Insurance			
9. Miscellaneous		\$	36,090.00
			,
Annual Session			9,050.00
Publications			
1. Journal	\$ 6,600.00		
2. Newsletter			7,000.00
Committees & Conferences			
1. Children's Dental Health	\$ 250.00		
2. Council on Dental Health			
3. Dental Practice Act			
4. District Officers Conference			
5. Reimbursement of Officers & Delegates			
6. Other			4,075.00
Legal Counsel		•••	500.00
Contributions		•	230.00
Bank and Audit			310.00
Memberships			515.00
Miscellaneous			450.00
Contingency			755.00
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#### PINEHURST, NORTH CAROLINA

## January 6, 1968

Call to Order: The Executive Committee convened at The Carolina, Pinehurst, North Carolina, Saturday, January 6, 1968. Dr. Frank G. Atwater, Chairman, called the meeting to order at 8:45 p.m. Dr. J. Homer Guion led in prayer.

Roll Call: Committee members present were: Drs. Frank G. Atwater. George F. Kirkland, Jr., C. P. Osborne, Jr., James H. Lee, C. W. Poindexter, L. B. Peeler, J. Homer Guion and S. H. Isenhower.

Staff members present were: Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Others present were: Dr. Ralph D. Coffey, Speaker of the House; and Dr. E. U. Austin, Chairman, Dental Care Programs Committee.

Approval of Minutes: Dr. Isenhower moved that the minutes of August 5, 1967 be approved. Seconded by Dr. Peeler. Motion carried.

Financial Report: Dr. Poindexter moved that the Secretary-Treasurer's report of December 31, 1967 be received for information. Seconded by Dr. Guion. Motion carried.

Dental Care Programs Committee: Dr. E. U. Austin, Chairman, Dental Care Programs Committee, reported that on December 14, 1967 his committee met with representatives of Hospital Care Association and Hospital Saving Association. Both associations indicated that they planned in the near future to offer dental care coverage to subscribers, including preventive maintenance and restorative treatment, based on a schedule of allowances or a percentage of usual and customary charges, and asked for the support, liaison and guidance of the North Carolina Dental

Dr. Austin stated that it was pointed out to the Blue Shield representatives that the Society was in the process of establishing a dental sentatives that the Society was in the process of establishing a dental service corporation in the State which would provide prepaid dental care with distinct advantages to the public and the profession, such as jurisdiction by the dental profession, a wide scope of services, quality controls, and payment on a usual and customary fee basis.

Blue representatives were reminded that the A.D.A. advocated the

dental service corporation concept as the best means of providing prepaid dental care. Furthermore, current A.D.A. policy dictates that in formulating dental prepayment plans priority consideration should be

given to reimbursement on a usual and customary fee basis.

Blue representatives emphasized that public demand for dental coverage under Blue Shield contracts was constantly increasing and that they intended to be in a position to meet this demand. They said that they did not anticipate any conflict between a Blue Shield plan for dental coverage and any plan offered by the proposed dental service corporation.

Dr. Austin recommended that the Executive Committee authorize the Dental Care Programs Committee to continue its discussions with the Blue agencies and offer its assistance in the development of an acceptable

prepaid dental plan by the Blues.

Dr. Peeler moved that the Dental Care Programs Committee be authorized to continue its liaison relationship with the Blue Shield agencies and assist them in formulating a plan for dental coverage which would be of benefit to the public, acceptable to the profession, and in keeping with A.D.A. policy on prepaid dental care. Seconded by Dr. Osborne. Motion carried.

Membership Committee: Dr. Isenhower moved that it be made a matter of record that the following have been dropped from the roll for non-payment of 1967 dues by December 31, 1967 as provided in Article VI. Section 6 of the *Bylaws*: W. B. Masters, Bakersville, First District; Donald J. McGowan, Charlotte, Second District; R. R. Shoaf, Lexington, Second District; and Jerry L. Corbin, Greensboro, Third District. Sec-

onded by Dr. Guion. Motion carried.

Dr. Isenhower moved that the applications for waiver of 1968 dues because of total disability according to Article VI, Section 10 of the Bylaws for the following be approved: H. M. May, Asheville, First District; Curtis E. Furr, Concord, Second District; and Everette R. Teague, Reidsville, Third District. Seconded by Dr. Kirkland. Motion carried.

Dental Care for the Aged Committee: Dr. Walter H. Finch, Jr., Chairman, Dental Care for the Aged Committee, reported his committee has had conferences and correspondence with the Board of Public Welfare in an effort to expand the limited program of dental care authorized for M.A.A. and O.A.A. recipients. He stated that the Board of Welfare had agreed to consider at its February meeting a request for enlarging the scope of dental care within the framework of the N. C. State Agencies Dental Fee Schedule.

The committee requested authorization to ask the Board of Welfare to expand its dental care program for M.A.A. and O.A.A. recipients to include all services listed in the N. C. State Agencies Fee Schedule with

the exception of the following: diagnostic models; plastic, acrylic, porcelain and gold crowns; and endodontic services. Dr. Finch indicated that the Board would approve such a program.

Dr. Kirkland commended the committee for its efforts to enlarge the scope of dental services for M.A.A. and O.A.A. recipients. Dr. Isenhower moved that the Dental Care for the Aged Committee request the Roard of Welfare to provide all dental procedures listed in the M.C. Board of Welfare to provide all dental procedures listed in the N. C State Agencies Fee Schedule for M.A.A. and O.A.A. recipients. Seconded by Dr. Kirkland. Motion carried.

Out-of-State Travel for Executive Secretary: Dr. Osborne moved that the Executive Secretary be reimbursed for expenses incurred while attending the 108th Annual Session of the A.D.A. in Washington, D. C. October 29-November 2, 1967.

Seconded by Dr. Poindexter. Motion carried.

Headquarters Suite: Dr. Osborne moved that Dr. Kirkland be reimbursed for expenses incurred in the operation of the headquarters suite at the 108th Annual Session of the A.D.A. in Washington, D. C., October 29-November 2, 1967. Seconded by Dr. Poindexter. Motion carried.

Honorary Membership: Dr. Kirkland moved that the Executive Committee recommend to the House of Delegates that Dr. Hubert A. Mc-Guirl, President-Elect, American Dental Association, be made an honorary member of the Society. Seconded by Dr. Isenhower. Motion carried. Dr. McGuirl will speak at the opening meeting of the 112th Annual Session in Pinehurst, May 5-8, 1968.

President's Comments: Dr. Kirkland made the following comments

and announcements:

A thirty-minute TV film on a career in dentistry has been completed and will be broadcast over the WUNC educational TV network next Spring. It is one of a series of six programs sponsored by the North Carolina Association of Professions designed to recruit students and interest them in pursuing a professional career. Dr. William D. Strickland was in charge of the production. Assisting him were: Drs. Roger E. Barton, Benjamin R. Baker, W. Robert Wentz, Roy L. Earp and L. P. Megginson, Jr.

Dr. Benjamin R. Baker has been recommended to the Certifying Board of the American Dental Assistants Association as chairman of the examining team which will administer the clinical examination

for all candidates in North Carolina.

Dr. J. Donald Kiser attended the Workshop on Public Relations in Chicago, August 7-8, 1967. He has recommended that the duties of the Publicity Committee be broadened and its name be changed to Public Relations Committee. It was noted that this would require amending

the Constitution and Bylaws.

The Ethics Committee has received complaints about the use of bank credit cards by dentists in this State. It was noted that the A.D.A. Judicial Council has ruled that this practice is ethical provided: (1) a dentist is not listed in the directory published by the bank; (2) a dentist does not display an emblem or other signs outside his office indicating that he will accept credit cards and that plaques within his office indicating participation be kept to a discreet and dignified minimum; (3) a dentist does not encourage patients to participate in a credit card program; and (4) a dentist does not increase his fees because of his participation.

The Task Force for Dentistry under the Regional Medical Program includes: Drs. James W. Bawden, Bennie D. Barker, E. A. Pearson, Jr., Donald W. Warren, and the President of the Society, who is a director of the Program. An application for an \$80,000 grant for continuing

education has been filed under this Program.

The Insurance Committee will meet in Raleigh January 28 to study five proposals for Group Overhead Business Expense Insurance and to discuss policy and guidelines for Financial Service Corporation of America in soliciting dentists for participating in the Society's Group

retirement program.

The Legislative Committee is formulating plans for providing effective liaison with members of the 1969 General Assembly. Consideration is being given to selecting dentists to approach all announced candidates for Governor and Lieutenant Governor before the primary, to determine the attitude of each candidate on public dental health programs and to request each candidate to name a dentist who will be his spokesman for the profession in the event of election. Legislation of interest to dentistry anticipated in 1969 include changes in the dental practice laws, statewide mandatory fluoridation, and implementation of Title XIX of the Social Security Act.

The Dental Care Programs Committee will meet with representatives of State agencies in Raleigh January 18 to discuss dentistry's role in the

implementation of Title XIX of the Social Security Act.

Over 50 dentists (including State and District officers) will be invited to attend the Governor's Conference on Health and Health Planning in Raleigh January 25, when the Governor is expected to announce the appointment of an Advisory Council. Three dentists have been recommended to the Governor for appointment to this Council. They are: Drs. Walter H. Finch, Jr., Mott P. Blair, and J. Homer Guion. The following have been recommended to Dr. Theodore Scurletis, Personal Health Division of the State Board of Health, for appointment

to a sub-committee of the Governor's Blue Ribbon Committee on Education: Drs. Duncan M. Getsinger, Burton A. Horwitz, Donald L. Henson, John M. Archer, III, and Frank A. Daniel. Dr. Archer was

asked to serve, but declined for health reasons.

The Fifth Annual Workshop of Dental Examiners and Dental Educators will be held in Chicago February 2-3, 1968. Dr. W. L. Hand, Jr., Chairman, Dental Practice Act Committee, advised that Dr. Bennie D. Barker, a member of the committee, would be attending as a representative of the UNC School of Dentistry and suggested that Dr. Barker could adequately represent the committee and the Society at the Workshop.

An invitation to send representatives to the Workshop on Hospital Dental Service in Chicago, June 21-22, 1968 will be referred to Dr.

Colin P. Osborne, Jr., President-Elect, for action.

Two applications for a grant are now under consideration by the Relief Committee. Currently there are no members receiving aid from

Dr. James M. Zealy, Chairman, State Institutions Committee, met with chiefs of dental services of State mental institutions at Kinston on October 19 to discuss the accreditation of their dental departments by the A.D.A. A representative of the A.D.A. Council on Hospital Dental

Service was present. Revaluation of dental departments of 13 hospitals for A.D.A. accreditation is underway. Efforts will be made to encourage 45 hospitals in the State to seek A.D.A. accreditation.

On September 12, the Military and Veterans Affairs Committee notified the VA office in Winston-Salem that the Society would agree to accept the VA basic fee schedule to replace the current fee schedule which has been in effect since 1959. Dr. T. Edwin Perry, Chairman, has been unofficially advised that the VA will agree to make this new fee schedule effective July 1, 1968.

Progress reports by the Dental Care Programs Committee, Dental Practice Act Committee, Dental Service Corporation Committee and the State Planning Committee for Dentistry will be made at the District

Officers Conference in Raleigh, January 13-14, 1968.

Dental Care for Military Dependents: Requests have been received from the 632nd Radar Squadron in Roanoke Rapids and Fort Fisher for a statement from the Society on the designation of these posts to

provide routine dental care to military dependents.

Dr. Kirkland reported that the 632nd Radar Squadron requested a reply by December 28, 1967. After conferring with dentists in the Roanoke Rapids-Weldon Area and the Military and Veterans Affairs Committee, he instructed the Executive Secretary to notify the commanding officer of the 632nd Radar Squadron that the Society was opposed to designating this station to provide routine dental care to military dependents because the station did not meet the criteria specified in the Dependents' Medical Care Act of 1956 as amended by P.L. 89-614.

Dr. Kirkland moved that his action on the request of the 632nd Radar Squadron be confirmed and that he be authorized to advise Fort Fisher that the Society opposes the designation of that military installation to provide routine dental care to military dependents because it does not qualify under criteria specified in the Dependents' Medical Care Act of 1956 as amended by P.L. 89-614. Seconded by Dr. Lee. Motion carried.

Insurance Conference: Dr. Ralph D. Coffey, a member of the A.D.A. Council on Insurance, was recognized. He announced that a Conference on Insurance, sponsored by the ADA Council on Insurance, would be held in Chicago the week of April 14, 1968. He urged that the Society be represented at the Conference by the President, Chairman of the Insurance Committee, and Executive Secretary.

Dr. Coffey commended the Society for providing a headquarters suite at the A.D.A. meetings in Dallas and Washington, D. C. and stated that it served a real purpose in providing a meeting place for delegates, officers, and members attending the meetings. He suggested that in the future the President and the Executive Secretary might seek assistance in hosting the suite.

Adjournment: On motion by Dr. Peeler, seconded by Dr. Lee and duly carried, the meeting was adjourned at 11:00 p.m.

> C. W. Poindexter, D.D.S. Secretary-Treasurer

Read and approved: January 28, 1968

# JOINT SESSION WITH ANNUAL SESSION COMMITTEE PINEHURST, NORTH CAROLINA

January 7, 1968

Call to Order: The Executive Committee and the Annual Session Committee convened in joint session at The Carolina, Pinehurst, North Carolina, January 7, 1968. President Kirkland called the meeting to order at 9:40 a.m. Dr. Colin P. Osborne, Jr. led in prayer. George F. Kirkland, Jr., Colin P. Osborne, Jr., James H. Lee, C. W. Poindexter, Frank G. Atwater J. Homer Cuion S. H. Lee, C. W. Poindexter, Frank G. Atwater, J. Homer Guion, S. H. Isenhower, L. B. Peeler.

Annual Session Committee members present were: Drs. L. D. Herring. General Chairman; Baxter B. Sapp, Jr. (Program); Robert H. Gainey (Clinic); W. Kimball Griffin (Entertainment); Robert W. Sugg (Dance) James E. Furr (Hospitality); David H. Freshwater (Liaison to Auxiliary); C. F. Clark, Jr. (Monitor); and W. A. Mynatt (Visual Education).

Staff members present were: Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Others present were: Drs. Ralph D. Coffey, Frederick G. Hasty and Joseph M. Johnson.

Remarks by President: Dr. Kirkland thanked all committee members for their co-operation and efforts in planning for the 1968 Annual Session and presented Dr. L. D. Herring, General Chairman.

Annual Session Reports: Dr. Herring submitted reports from his committee members covering all areas of the Annual Session, including appropriation requests. He reported that rising costs of services would require a total appropriation of \$9,725 for the operation of the 1968 Annual Session, which was \$675 over the \$9,050 budgeted. However, he noted that the Exhibits Committee reported revenue from sale of exhibits would total \$11.190 which was \$310 in excess of the \$10.880 originally anticipated.

Executive Session: Dr. Kirkland expressed his appreciation for the fine reports submitted and the Executive Committee went into executive session with Dr. Atwater presiding.

Review of Reports: The reports submitted by the Annual Session Committee were reviewed. Of special interest it was noted that:

1. The Arrangements Committee announced an increase in hotel accommodations of \$1.00 per person. Single rooms would be \$21 per day and double rooms would be \$38 American plan.

2. The Arrangements Committee planned to include announcements of meetings of allied organizations in the hand program but not to

include full programs of these meetings.

The Hospitality Committee requested sufficient funds to operate a hospitality room, but that consideration was being given to eliminating this feature of its activity.

4. The Program Committee recommended no scheduled coffee breaks at the scientific meetings but that coffee be provided for the convenience of those attending on a self-service basis.

5. The Sports Committee recommended that golf awards be presented

at the banquet on Tuesday night.

Approval of Budget: Dr. Peeler moved that the reports of the Annual Session Committee be approved and that a total of \$9,725 be allocated

to the Annual Session Committee. Seconded by Dr. Guion. Motion carried. A copy of the budget for the Annual Session Committee is attached. It was noted that this was \$675 in excess of the \$9,050 allocated to the Annual Session Committee in the 1967-68 budget adopted August 5, 1967. It was also noted that revenue from sale of exhibits would yield \$11,190, an increase of \$310 over the \$10,880 anticipated and that would increase the Contingency Fund from \$755 to \$1,065. Dr. Poindexter moved that the additional \$675 allocation to the Annual Session Committee be charged to the Contingency Fund. Seconded by Dr. Peeler. Motion carried.

Insurance Indemnification: Dr. Joseph M. Johnson was recognized. Dr. Johnson stated that dentists were frequently embarrassed because patients did not understand the terms of indemnification in their insurance policies and assumed that because the policy stated that a certain fee would be paid for a specific procedure, the dentist would accept that fee. He suggested that a pamphlet be prepared explaining in layman's language the terms of indemnification used in insurance policies and the responsibility of the patient for any difference in the usual and customary fee of the dentist over and above the fee allowed by the insurance carrier.

Insurance Conference: Dr. Ralph D. Coffey announced that the A.D.A. Council on Insurance planned to hold a conference on group insurance plans sponsored by the Association the week of April 14 in Chicago. Dr. Coffey is a member of this Council. He urged that the Society send appropriate representatives to the Conference.

Dr. Osborne moved that the President consider designating appropriate representatives to the Conference. Seconded by Dr. Lee. Motion

carried.

Next Meeting: Dr. Osborne moved that the next regular meeting be held Sunday, May 5, 1968 at 9:30 a.m. at The Carolina in Pinehurst. Seconded by Dr. Poindexter. Motion carried.

Mr. Cunningham advised that it might be necessary to convene the Executive Committee before the next scheduled meeting on May 5 to consider and act upon reports from several committees which are currently very active, including the Dental Care Programs Committee and the Dental Service Corporation Committee.

Adjournment: On motion by Dr. Guion, seconded by Dr. Poindexter and duly carried, the meeting was adjourned at 11:45 a.m.

> C. W. Poindexter, D.D.S. Secretary-Treasurer

Read and approved: January 28, 1968

#### 1968 ANNUAL SESSION BUDGET

# Approved January 7, 1968

Arrangements (Note 1)	\$3,045.00
Clinic	129.00
Entertainment	1,650.00
Exhibit (Note 2)	2,215.00
Hospitality	153.00
House of Delegates	
Monitor	000.00
Necrology	30.00
Program	1,863.00
Publicity	275.00
Sports	100.00
Visual Education	

\$9,725.00

- Note 1. Includes an appropriation of \$300 to the Auxiliary to underwrite the lawn party.
- Note 2. Includes an appropriation of \$30 to the Scientific Exhibits Committee.

# RALEIGH, NORTH CAROLINA

## January 28, 1968

Call to Order: The Executive Committee convened at the Velvet Cloak Inn, Raleigh, North Carolina, Sunday, January 28, 1968. Dr. Frank G. Atwater, Chairman, called the meeting to order at 11:15 a.m. Dr. Colin P. Osborne. Jr. led in prayer.

Roll Call: Committee members present: Drs. Frank G. Atwater, George F. Kirkland, Jr., Colin P. Osborne, Jr., James H. Lee, C. W.

Poindexter, L. B. Peeler and J. Homer Guion.

Staff members present: Andrew M. Cunningham, Executive Secretary. Others present: Drs. A. Breece Breland, Editor-Publisher; E. U. Austin, Chairman, Dental Care Programs Committee; and E. A. Pearson, Jr., Director, Division of Dental Health, North Carolina State Board of Health.

Approval of Minutes: Dr. Kirkland moved that the minutes of January 6 and 7, 1968 be approved. Seconded by Dr. Osborne. Motion carried.

Implementation of Title XIX. Dr. E. U. Austin, Chairman, Dental Care Programs Committee reported that his committee met with mem-State Planning Task Force and representatives of interested State agencies on January 18, 1968 to discuss dental care to be provided under Title XIX in North Carolina. The committee was requested to prepare plans for comprehensive dental care for all currently enrolled welfare recipients based on different levels of funding ranging from \$5 to \$10 million.

Dr. Austin pointed out that availability of funds and manpower, and estimated usage by those eligible to participate in a comprehensive dental care program were key problems considered by the committee in developing plans for dental services under Title XIX. He estimated that it would cost \$12 million to provide comprehensive dental care for all categorical recipients of Title XIX benefits.

The committee submitted two plans for the implementation of dental

care services under Title XIX:

Provide comprehensive dental care immediately for all cate-

gorical recipients of Title XIX benefits.

(2) Provide comprehensive dental care for all categorical recipients of Title XIX benefits on an incremental basis over a 15-year period. Under this plan, all categorical recipients 6 years old, 65 years old, and 6½ per cent of all other categorical recipients will receive comprehensive dental care the first year. Each successive year new increments of 6 year olds, 65 year olds, and 6½ per cent of other categorical recipients will receive dental care, while those already under the categorical recipients will receive dental care, while those already under the categorical recipients will receive dental care, while those already under the categorical recipients will receive dental care. treatment will return for maintenance care. At the end of 15 years all categorical recipients will be receiving dental care.

Dr. Austin pointed out that the Social Security Act may not permit Federal funding of an incremental program, and that State funds would have to be provided to implement such a program, at least until 1975

when dental services must be provided under Title XIX.

The committee estimated that at the present time one-third of the population of the State could be eligible for welfare. The Committee also estimated that 40 per cent participation might be anticipated in a comprehensive dental care program.

In addition, the committee estimated that under the proposed incremental plan for providing dental care the patient load of dentists would

increase by seven patients per dentist per year.

The committee also cited the problem of identifying patients who were receiving dental care under OEO and ESEA programs to prevent

overlapping of programs.

Dr. Austin read a statement from Dr. Roy L. Lindahl, Chairman, Dental Service Corporation Committee, outlining the advantages of using a dental service corporation as a fiscal intermediary for publicly-funded programs particularly in the area of quality review which would be acceptable to the profession and protective to the consumers of dental health services. Dr. Lindahl stated that the North Carolina Dental Service Corporation would be operative prior to the implementation of Title XIX in this State, and would be available to act as a fiscal intermediary in administering dental health care programs under Title XIX.

Dr. Guion moved that the Dental Care Programs Committee be instructed to present to the appropriate State agency for its consideration, the two plans for implementation of a comprehensive dental care program under Title XIX as outlined in its report of January 25, 1968. Seconded by Dr. Kirkland. Motion carried.

Out-of-State Travel for Executive Secretary: Dr. Guion moved that the Executive Secretary be authorized to attend the Insurance Conference to be held in Chicago, April 18-19, 1968, sponsored by the ADA Council on Insurance, Seconded by Dr. Poindexter, Motion carried.

Dental Care for Military Dependents: A request was received from the 810th Radar Squadron, Winston-Salem for a statement from the Society on the designation of this post to provide routine dental care to military dependents. A copy of the request has been forwarded to the Forsyth County Dental Society for information and comment.

Dr. Kirkland moved that the 810th Radar Squadron be advised that the Society opposes its designation to provide routine dental care to military dependents because it does not qualify under criteria specified in the Dependents' Medical Care Act of 1956 as amended by P.L. 89-614.

Seconded by Dr. Guion. Motion carried.

State Agency Fee Schedule: Dr. Lee moved that the nomenclature of Endodontic Services listed in the North Carolina State Agencies Dental Fee Schedule of October 1, 1967 be changed to read "Single Canal Tooth, Bi-Canal Tooth, and Tri-Canal Tooth" and that this be referred to the Dental Care Programs Committee for proper action. Seconded by Dr. Osborne. Motion carried.

Comprehensive Health Planning: It was noted with pleasure that Dr. Amos S. Bumgardner of Charlotte had been appointed to the Governor's Advisory Council on Comprehensive Health Planning.

Auxiliary Personnel Affairs: Dr. Osborne advised that the Durham Technical Institute was seeking a director for its Dental Laboratory Technology Program to replace Dr. T. C. Sample recently resigned. He noted that the Institute was seeking a qualified dental technician to head the program rather than a dentist. Dr. Osborne moved that Durham Technical Institute be strongly urged to employ a dentist as director of its Dental Laboratory Technology Program. Seconded by Dr. Kirkland. Motion carried.

Dr. Osborne announced that the Advisory Committee on the Education of Auxiliary Personnel at its meeting on January 24, 1968 recommended that no new educational programs for auxiliary personnel be implemented at the present time but every effort be made to strengthen current programs. He urged the Society to support requests by the Department of Community Colleges for additional funds to accomplish

this objective.

Dr. Osborne advised that the North Carolina Dental Hygienists Association was currently organizing districts corresponding to the Districts

of the Society.

He recommended that Districts be urged to give consideration to including auxiliary personnel in their plans for annual meetings.

Adjournment: On motion by Dr. Kirkland, seconded by Dr. Poindexter, and duly carried, the meeting was adjourned at 1:05 p.m.

> C. W. Poindexter, D.D.S. Secretary-Treasurer

# PINEHURST, NORTH CAROLINA

## May 5, 1968

Call to Order: The Executive Committee convened in the Camellia Room of The Carolina in Pinehurst, Sunday, May 5, 1968. Dr. Frank G. Atwater, chairman, called the meeting to order at 9:45 a.m. Dr. Osborne led in prayer.

Roll Call: Committee members present were: Drs. Frank G. Atwater, George F. Kirkland, Jr., James H. Lee, Colin P. Osborne, Jr., C. W. Poindexter, S. H. Isenhower, L. B. Peeler and J. Homer Guion.

Others present were: Dr. A. Breece Breland, editor-publisher; Dr. Ralph D. Coffey, speaker of the house.

Resolution on Fluoridation: Dr. Guion moved that the following resolution presented by Dr. E. A. Pearson, Jr., director, Division of Dental Health, North Carolina State Board of Health, be approved and submitted to the House of Delegates for consideration:

Resolved, that the North Carolina Dental Society support the adjustment of the fluoride ion in all public drinking water supplies which do not presently contain the optimum amount of fluoride, and further support any measures that are appropriate, acceptable, and feasible in delivering a sound preventive dental health program to the citizens of North Carolina.

Dr. Osborne seconded the motion and it was carried.

Introduction of Guest: Dr. Atwater introduced Dr. Arthur W. Kellner of Hollywood, Florida, fifth district trustee, American Dental Association, and welcomed him to North Carolina and the 112th Annual Session of the Society.

**Approval of Minutes:** On motion by Dr. Poindexter, seconded by Dr. Lee the minutes of January 28, 1968 were approved.

Financial Report: Dr. Poindexter presented the Secretary-Treasurer's report of April 30, 1968. He noted that income for the year would probably exceed the amount anticipated in the budget by about \$900 and that expenses would probably be \$2,100 less than the budgeted figure. He estimated that there would be an operating surplus at the end of the fiscal year of approximately \$3,098.

On motion by Dr. Poindexter, seconded by Dr. Peeler the report was:

received for information.

**Contribution to AFDE:** On motion by Dr. Poindexter, seconded by Dr. Peeler, the Secretary-Treasurer was authorized to pay \$100 to the American Fund for Dental Education as a contribution from the Society. It was noted that the 1967-68 budget included this item.

Scrap Amalgam Funds: Dr. Bennie D. Barker, secretary-treasurer, Dental Foundation of North Carolina, Inc., presented a proposal for the establishment of a North Carolina Dental Auxiliary Fund under the supervision of the Foundation to which the North Carolina Dental Auxiliary could contribute the proceeds from their annual scrap amalgam drives. On motion by Dr. Isenhower, seconded by Dr. Peeler the proposal was approved.

Relief Fund: Dr. Kirkland noted that there was considerable and unusual delay in the processing of applications for relief grants. It was suggested that the chairman of the Relief Committee be asked to meet with the Executive Committee to apprise the committee of the difficulties experienced and to answer questions concerning the handling of applications for relief grants.

Dr. Lee moved that application be made to the ADA Relief Fund for an emergency grant of \$1,800 for Dr. W. Kemp Lindsay of Fayette-

ville, and that a matching amount be paid to Dr. Lindsay from the Society's Relief Fund. Dr. Isenhower seconded the motion. It was defeated.

It was noted that investigation of Dr. Lindsay to qualify him for a relief grant had been initiated in October, 1967. In March, 1968 the application was forwarded to the Central Office but had to be returned to the Relief Committee because it was incomplete. On April 30 the completed application was received by the Central Office and forwarded to the ADA Council on Relief for approval.

Dr. Kirkland moved that the chairman of the Relief Committee be invited to meet with the Executive Committee at its next meeting to discuss the problem of processing relief grant applications. Dr. Peeler seconded the motion and it was carried.

Life Membership: A letter from Dr. L. B. Higley of the Third District was received in which he requested life membership in the Society. It was pointed out that the Bylaws provide that a member must have 35 years of membership in good standing in the Society and attain the age of 65 to be eligible for life membership in the Society. It was noted that Dr. Higley was a life member of the ADA and although he met the age requirement, he did not meet the membership requirement for life membership in the State Society.

Dr. Higley requested that membership in other constituents of the ADA before coming to North Carolina be considered in determing his eligibility for life membership in North Carolina. It was noted that

this would require a change in the Bylaws.

It was suggested that Dr. Higley apply for classification as a retired member which would relieve him of paying dues. However, it was explained that Dr. Higley is not fully retired and would not be eligible for this classification.

On the basis of the Bylaws the committee determined that Dr. Higley's

request could not be granted.

Insurance Committee: On motion by Dr. Guion, seconded by Dr. Peeler, a report from the Insurance Committee was received for information.

ADA Retirement Program: Dr. Ralph D. Coffey, a member of the ADA Council on Insurance, was recognized. He called to the committee's attention the ADA group retirement program underwritten by Equitable Life Assurance Society of the United States, which is available to all members.

Tribute to Dr. Edwards: Dr. Guion moved that an appropriate resolution be introduced in the House of Delegates adjourning the first meeting of the House in memory of the late Dr. Z. L. Edwards, a past president of this Society and active in Society affairs for 45 years. Dr. Osborne seconded the motion and it was carried.

President's Comments: President Kirkland thanked the officers and Executive Committee members for their unqualified support during the past year. He noted with pride the spirit of unity that existed in the official family and the lack of "divisiveness" and "credibility gap."

Next Meeting: It was announced that the Executive Committee would meet on Wednesday, May 8, following the adjournment of the 112th Annual Session.

Adjournment: There being no further business the meeting was adjourned.

C. W. Poindexter, D.D.S.

Secretary-Treasurer

Read and approved: August 3, 1968

# Committee Reports

STANDING AND SPECIAL (In alphabetical order)

## ANNUAL SESSION COMMITTEE

General Chairman—L. D. HERRING

Arrangements—Zeno L. Edwards, Jr. Hospitality—James E. Furr

Clinic—ROBERT H. GAINEY

Monitor-C. F. CLARK, JR.

Entertainment Co-ordinator—

Necrology—Robert T. Byrd

W. KIMBALL GRIFFIN

Program—BAXTER B. SAPP, JR. Publicity—GLENN F. BITLER

Banquet and Reception—
C. R. VAI

Dance—Robert W. Succ

Sports-William J. Wiggs

Exhibits—R. B. BARDEN

Visual Education—W. A. MYNATT

Scientific Exhibits-

HENRY V. MURRAY, JR.

C. R. VANDERVOORT

Liaison to Auxiliary—David H. Freshwater

Meetings: The Annual Session Committee met January 6, 1968 at The Carolina, in Pinehurst. Eight members were present to present their reports. Seven members sent written reports by mail. On January 7, 1968, the reports were presented to the Executive Committee.

**Responsibility:** The General Chairman has endeavored to develop a program format and to co-ordinate the activities of the Annual Session Committee.

Arrangements: The Executive Secretary's office has completed many of the responsibilities of the Arrangements Committee. Hotel application forms were mailed to members from the Central Office. The meeting rooms have been assigned and a list of required equipment by clinicians has been submitted. A stenotypist and projectionist have been procured. The hotel will be informed of the needs, such as signs, sound systems, and coffee. Registration supplies, registrars, and hand programs have been ordered. Floor managers have been appointed. The Executive Committee approved an appropriation of \$3,045.

Clinics: Approximately 26 table clinics will be presented in the Cardinal Ballroom, Wednesday, May 8, from 9 to 11:30 a.m. An appropriation of \$129 has been approved.

Sports: An 18-hole Golf Tournament has been planned for Sunday, May 5, at the Pinehurst Country Club. Also planned is a Hole-in-One Contest on the putting green in front of the club house. Awards to the winners will be presented Tuesday night at the banquet. Winners do not have to be present to receive their awards. An appropriation of \$100 has been approved.

**Necrology:** A Necrology Service will be held in memory of the deceased members on Sunday, May 5, at the General Session. A flower will be placed in a vase for each name called. An appropriation not to exceed \$30 has been approved.

Visual Education: There will be three one-half hour film programs shown preceding the Scientific Sessions. A projectionist will be provided by The Carolina. An appropriation of \$15 has been approved.

**Monitor:** Monitors have been assigned to all Scientific and General Sessions. Duties and hours have been mailed to each Monitor. No appropriation was requested.

**Publicity:** The committee has secured the services of Mr. Demont Roseman, Assistant Director, UNC News Bureau, to handle all publicity releases on the 1968 Annual Session. Interviews with clinicians, speakers, and other V.I.P.'s will be arranged. An appropriation of \$275 has been approved.

Exhibits: The commercial exhibits will be displayed in the Exhibition Hall. There will be 90 booths bringing a total revenue of \$11,190, which is \$1,140 more than last year. Exhibiting hours will be from 2:00 to 6:00 p.m. on Sunday and from 9:00 a.m. to 5:00 p.m. on Monday and Tuesday.

A social hour for the exhibitors will be held on Monday, May 6. The exhibitors will continue to be accommodated in The Carolina.

Door prizes will be awarded on Wednesday, May 8, at the close of the Third General Session.

The decoration and hotel expense remain the same as last year. An appropriation of \$2,215 has been approved.

Scientific Exhibits: There will be 14 scientific exhibits on display in the South Room and the Dogwood Room. The chairman of this committee has suggested that future chairmen of this committee attend the ADA meeting prepared to solicit for exhibits "on the spot" as competition for exhibits has become quite keen. An appropriation of \$30 has been approved. It was included in the appropriation with commercial exhibits.

**Program:** Clinicians and their presentations are: Dr. Rex Ingraham, University of Southern California, "Aspects of Restorative Dentistry"; Dr. Francis T. Scott, Jacksonville, Florida, "Periodontia as Related to Restorative Dentistry"; and Dr. John N. Ott, Environmental Health and Light Research Institute, Sarasota, Florida, "The Influence of Light on Living Things."

An appropriation of \$1,863 has been approved.

Hospitality: Upon recommendation of the President, a Hospitality Room will not be operated this year. Efforts will be directed in providing flowers in the rooms of the wives of the V.I.P.'s, newspapers at the door each morning, complimentary green fees, and such other individual personal services as might add to the pleasure of our guests. An appropriation of \$153 has been approved.

Entertainment: Arrangements are being completed for the following social events on Tuesday, May 7: (1) An informal social hour for members and guests; (2) the Annual Banquet; and a dance and entertainment. An appropriation of \$1,650 has been approved.

#### Resolutions

This report is informational in nature and no resolutions are presented.

#### CANCER COMMITTEE

BENNY W. MARTIN. Chairman

DWIGHT L. CLARK W. ROBERT CAVINESS GROVER C. HUNTER, JR. GLENN A. LAZENBY, JR.

Meetings: No meetings were held.

Assignments: The committee received no assignment from the 19677

House of Delegates.

The committee is pleased to report that several county dental groups have held free oral cancer detection clinics during the past year, and other groups have scheduled clinics for the coming year. The North Carolina Division of the American Cancer Society has continued to give its valuable assistance and support to these projects.

Regional Medical Program: The North Carolina Regional Medical Program has been allotted funds for dental participation in their program of research and training in the fields of heart disease, cancer, stroke, and related diseases.

#### Resolutions

This report is informational in nature and no resolutions are presented.

### CHILDREN'S DENTAL HEALTH COMMITTEE

DUNCAN M. GETSINGER. Chairman

D. L. ASHWORTH N. J. DUNCAN ROBERT H. GILBERT J. P. HALE

D. B. SEITTER

Meetings: The committee held no formal meetings.

Assignment: This committee was assigned the responsibility of planning and co-ordinating the promotion and observance of National Children's Dental Health Week, February 4-10, 1968 in North Carolina.

**Organization:** All local societies in the State were contacted and were asked to cooperate in the promotion of National Children's Dental Health Week. Twenty-five responded. Program kits and approximately 2,300 posters were distributed to these 25.

Through the courtesy of the General Electric Company and Aquatec, 18 automatic toothbrushes and 20 Water Piks were made available to the participating local societies. These were awarded to winners of

various contests held in the public schools.

Activities of Local Societies: From reports received, local societies sponsored a variety of events in promoting NCDHW throughout the State, including:

1. Poster, smile, slogan and essay contests in schools.

2. Displays in windows of merchants, public schools, and libraries.
3. Retail stores placed a miniature poster in all customer packages.

The posters were supplied by the local dental society.

4. School visitation programs by dentists, dental assistant students, and dental hygiene students included oral examinations of elementary school children and instruction in toothbrushing and other oral hygiene procedures.

5. Toothbrushing kits were distributed in the schools.

6. Radio spot announcements, TV programs and newspaper articles.
7. From the middle of January to February 10, the Goldsboro post office cancelled all mail with an indicia advertising NCDHW.

A picture story of the observance of NCDHW in North Carolina will

appear in the April issue of the Journal.

Comments: The committee is indebted to the 25 local dental societies who participated and for the excellent reports submitted. From all indi-

cations NCDHW was well promoted in North Carolina.

For the past three or four years, the committee has furnished outdoor billboard posters to local dental societies. This year it was decided to discontinue this program. It was noted that at least one local dental society purchased billboard posters and contracted with an advertising agency for display of them.

#### Resolutions

This report is informational in nature and no resolutions are presented.

# CONSTITUTION AND BYLAWS COMMITTEE

THOMAS G. NISBET, Chairman (1970)

G. SHUFORD ABERNETHY (1968)

J. HENRY LIGON, Jr. (1972)

DAN T. CARR (1969)
C. P. GODWIN (1971)

Meetings: The committee met at the Central Office in Raleigh, March 31, 1968.

Assignments: On February 26, 1968 a proposed revision of the Society's committee structure was transmitted to the Constitution and By-

laws Committee for its consideration and recommendations.

The committee wishes to thank and commend the Committee on Committee Structure for its diligence in preparing the revision and for a difficult task well executed. Essentially, the committee is in full accord with the proposed revision with but few exceptions.

Comments on Revision: It is noted that the proposed revision of the committee structure provides for more effective administration of the affairs of the Society by reducing the number of standing committees to 14 and re-aligning the duties of each. The *Bylaws* now provide for 18 standing committees. The present administration found it necessary to appoint 24 special committees. This makes a total of 42 committees. The fact that there are so many special committees indicates a weakness in the committee structure, and the proposed revision overcomes this weakness by broadening the responsibilities of each of the committees and giving them authority to appoint sub-committees.

overcomes this weakness by broadening the responsibilities of each of the committees and giving them authority to appoint sub-committees.

The proposed revision recommended the elimination of the Library and History Committee since the Central Office now maintains a file of news clippings and other historical material suggested in the duties of this committee. With this, the Constitution and Bylaws Committee

agrees.

The revision also proposed that the Constitution and Bylaws Committee be eliminated and it be made a standing committee of the House of Delegates. With this, the Constitution and Bylaws Committee does

not agree.

The revision also proposed the elimination of the Prosthetic Dental Service Committee and that its duties be assigned to an Auxiliary Personnel Committee which would also be responsible for the training and utilization of dental assistants and dental hygienists. With this, the Constitution and Bylaws Committee does not agree. We submit that this

committee should be retained and more appropriately be called the

Dental Laboratory Relations Committee.

The revision proposed that the State Institutions Committee be eliminated and its duties assigned to a Hospital Dental Service Committee. The Constitution and Bylaws Committee agrees.

The revision proposed that the name of the Military and Veterans Affairs Committee be changed to Federal Dental Services Committee.

The Constitution and Bylaws Committee agrees.

The revision proposed a Dental Care Programs Committee which would be responsible for recommending policies and guide lines for administering and financing group dental care programs. In this, the Constitution and Bylaws Committee concurs.

The Constitution and Bylaws Committee submits appropriate resolutions for amending the Constitution and Bylaws. These amendments, with the exceptions noted above, are essentially the same as those

proposed by the Committee on Committee Structure.

#### Resolutions

1. Resolved, that Article II, Standing Committees of the *Bylaws* be deleted and the following substituted therefor:

# ARTICLE II—STANDING COMMITTEES

Section 1. The standing committees of this society shall be:

Annual Session Committee
Constitution and Bylaws Committee
Dental Care Programs Committee
Dental Education Committee
Dental Health Committee
Dental Laboratory Relations
Committee

Ethics Committee
Executive Committee
Federal Dental Services Committee
Hospital Dental Service Committee
Insurance Committee
Legislative Committee
Membership Committee
Public Relations Committee
Relief Committee

- Section 2. Unless otherwise provided in these *Bylaws*, each standing committee shall consist of five members appointed for a term of one year by the President. The President will also designate the Chairman. Whenever feasible all five Districts shall be represented on each committee.
- Section 3. A standing committee may appoint sub-committees which shall be directly responsible to the standing committee and which shall have no power except that delegated to them by the standing committee. Such sub-committees shall report only to the standing committee which created them.
- **Section 4.** Each standing committee shall submit an annual report in writing to the House of Delegates at least 45 days prior to the annual session and shall submit progress reports to the Executive Committee as required.
- Section 5. Annual Session Committee. It shall be the duty of this committee to make all arrangements for the annual session of this Society.
- Section 6. Constitution and Bylaws Committee. This committee shall consist of five members, one from each District Society, appointed by the President for terms of five years, four years, three years, two years, and one year respectively, and thereafter one member shall be appointed annually for a term of five years.

The duties of this committee shall be:

a. To review the articles of the *Constitution and Bylaws* in order to keep them consistent with the Society's program.

b. To recommend editorial corrections in the Constitution and By-

laws.

c. To act as a standing committee of the House of Delegates on constitution and bylaws.

Section 7. Dental Care Programs Committee. The duties of this committee shall be:

a. To formulate and recommend policies relative to the planning, administration and financing of group dental care programs.

b. To study, evaluate, and disseminate information on the planning,

administration, and financing of group dental care programs.

c. With the approval of the Executive Committee a review committee for prepayment programs shall be appointed as a sub-committee of this committee.

Section 8. Dental Education Committee. The duties of this committee shall be:

a. To serve in liaison capacity to the School of Dentistry and the

Department of Education in this State.

b. To assist educational institutions in attaining and maintaining accreditation by the Council on Dental Education of the American Dental Association.

c. To recommend and promote programs of continuing education.
d. To conduct studies and make recommendations on the training and utilization of auxiliary personnel.

Section 9. Dental Health Committee. The duties of this committee shall be:

a. To study and recommend plans and programs to promote the dental health of the public.

 To establish and maintain effective relations with responsible agencies in the promotion, administration, and advancement of dental health.

c. To serve in liaison capacity to the Division of Dental Health of the North Carolina State Board of Health.

d. To serve in liaison capacity to the Department of Public Instruction.

Section 10. Dental Laboratory Relations Committee. This committee shall consist of five members, one from each District Society, appointed by the President for terms of five years, four years, three years, two years, and one year respectively and thereafter one member shall be appointed annually for a term of five years.

This committee shall represent the Society and serve the profession in all matters concerning dental laboratories and dental laboratory tech-

nicians.

Section 11. Ethics Committee. This committee shall consist of five members, one from each District Society, appointed by the President for terms of five years, four years, three years, two years and one year respectively, and thereafter one member shall be appointed annually for a term of five years.

The duties of this committee shall be:

a. To constitute a court of trial for members charged with conduct subject to disciplinary action according to Article XVI of these Bylaws.

b. To recommend changes in the Code of Ethics.c. To issue advisory opinions on the Code of Ethics.

d. To act as a standing committee of the House of Delegates on ethics.

Section 12. Executive Committee. This committee shall consist of the President, President-Elect, Vice President, Secretary-Treasurer, the immediate past President and three appointed members. The President shall annually appoint one member of this committee for a term of three years, and shall designate the Chairman.

The duties of this committee shall be:

a. To have general superintendence of the affairs of the Society in accordance with the Constitution and Bylaws and the policies determined by the House of Delegates.

b. To determine the date and place for convening each annual session.

c. To cause all accounts of the Society to be audited by a certified public accountant at least once a year.

d. To prepare an annual budget for carrying on the affairs of the

Society.

e. To submit an annual report to the House of Delegates.

f. To submit to the House of Delegates nominees for honorary membership.

g. To provide for the maintenance and supervision of the Central Office.

h. To cause to be bonded by a surety company all officers and employees of the Society entrusted with Society funds.

i. To appoint annually an Executive Secretary.

j. To appoint annually an Editor-Publisher.

k. To appoint an Associate Editor for a term of one year upon the recommendation of the Editor-Publisher.

Section 13. Federal Dental Services Committee. The duties of this committee shall be:

a. To act in liaison capacity to the Veterans Administration.

b. To formulate programs for the participation of dentists in disaster preparedness programs.

c. To review and study programs of dental care for members of the Federal Dental Services and their dependents.

Section 14. Hospital Dental Service Committee. Members of this committee shall be members of hospital staffs and knowledgeable in the areas of hospital administration, dental department organization and dental education programs.

The duties of this committee shall be:

a. To maintain liaison with hospitals and patient care units other than hospitals in the State, both public and private, encouraging the formation of dental departments and providing assistance in the improvement of dental services in hospitals, including dental internships and residences.

b. To assist hospitals and patient care units other than hospitals in attaining and maintaining accreditation by the Council on Hospital Den-

tal Service of the American Dental Association.

c. To assist hospitals and patient care units other than hospitals in expanding dental programs and implementing patient education programs.

Section 15. Insurance Committee. The duties of this committee shall be:

a. To study and recommend to the House of Delegates programs of group insurance for the protection of the members of this Society.

b. To supervise group insurance programs presently in force.

c. To negotiate with brokers, agents, and insurance companies to obtain greater coverage, improved service or more attractive premium rates for group insurance programs available to the membership.

Section 16. Legislative Committee. The duties of this committee shall be:

a. To assist the North Carolina General Assembly in a proper understanding of all matters before it affecting the Society or the dental profession.

b. To recommend to the House of Delegates the sponsoring of legislation which it considers in the best interest of the Society and the

profession and the opposing of measures to the contrary.

c. To secure legislative action with the approval of the House of Delegates, or approval by the Executive Committee when approval by the House of Delegates is not feasible.

Section 17. Membership Committee. This committee shall consist of the Vice President who shall be the chairman, and the Vice Presidents of the District Societies.

The duties of this committee shall be:

a. To maintain an active campaign for new members.

b. To endeavor to secure the reinstatement to active membership those members who have become delinquent.

Section 18. Public Relations Committee. The duties of this committee shall be:

a. To study and recommend a public relations program for this Society designed to enlighten and direct public opinion in hygiene and dental services.

b. To disseminate information and publicity concerning the activities

of this Society.

Section 19. Relief Committee. This committee shall consist of five members, one from each District Society, appointed by the President for terms of five years, four years, three years, two years, and one year respectively, and thereafter one member shall be appointed annually for a term of five years. The committee shall elect one of its own members as chairman each year at the time of the annual session of the Society and report promptly to the Secretary-Treasurer.

This Society shall establish the North Carolina Dental Society Relief Fund, fully detached from any other fund of the Society, for the purpose of granting financial aid to dentists, their dependents, and survivors, which aid may be given directly or by way of contributions to the American Dental Association Relief Fund and all of which shall be in accordance with any indenture of trust governing the Relief Fund and in accordance with rules and regulations formulated by the Relief Committee and approved by the Executive Committee of this Society.

Relief funds shall be held in the name of the North Carolina Dental Society Relief Fund, and shall be derived from cash, securities and other property transferred or appropriated to it by the House of Delegates or Executive Committee, contributions, bequests and earnings there-

on.

The chairman shall keep a continuous record of proceedings and make an annual written report to the House of Delegates.

The duties of the Relief Committee shall be:

a. To serve as trustees of the North Carolina Dental Society Relief Fund.

b. To receive applications for relief grants, make proper investigations and where appropriate, recommend to the American Dental Association Relief Fund that payments be made in the amounts and for the duration deemed proper.

c. To cause contributing payments to be made to the American Dental Association Relief Fund and relief payments to be made directly to recipients, consistent with the trust indenture establishing the Relief

Fund and rules and regulations adopted thereunder.

d. To formulate programs for increasing the principal of the North Carolina Dental Society Relief Fund.

2. Resolved, that Article VII, Standing Committees, of the Constitution be deleted.

#### CONTINUING EDUCATION COMMITTEE

GUY R. WILLIS, Chairman

BENNIE D. BARKER KEITH L. BENTLEY GLENN F. BITLER WADE H. BREELAND FRANK H. DANIEL DAVID H. FRESHWATER FREDERICK G. HASTY ROBERT W. HOLMES WALTER T. McFall, JR. LACKEY B. PEELER

JAMES A. PRIVETTE

Assignments: The Continuing Education Committee was initially appointed in November, 1966, with the specific charge to "institute a program of continuing education in North Carolina." The committee feels that the success of any such program will inevitably be tied to the School of Dentistry at Chapel Hill, since the School is the only dental educational facility in North Carolina with the potential staff and resources to assist in the planning and implementation of such a State-wide program.

Meetings: The initial meeting of the committee was held on January 21, 1967. At that time it was noted that the School of Dentistry had applied to the U. S. Public Health Service for support of a comprehensive study of continuing education needs for North Carolina dentists. Subsequently, under a contract supported by the U. S. Department of Health, Education and Welfare, the School and the Research Triangle Institute developed a questionnaire survey relating to the educational needs and desires of dentists practicing in the State. The committee feels that the wisest course in the planning of long range continuing education programs is to take advantage of the analysis of data from this particular survey.

**Progress:** The Research Triangle Institute's Statistics Research Division moved forward rapidly in assisting the School in the collecting and processing of necessary information to be gathered. This project suffered a four months' delay in securing Bureau of the Budget clearance in Washington, D. C., and this in turn has occasioned delay in the distribution of the questionnaire to North Carolina's 1,400 practicing dentists. However, the committee has been informed that this clearance has been recently granted and the survey will be forthcoming in the immediate future. Once these data are analyzed and reported, it is believed the committee can realistically begin its work in planning a State-wide program of continuing education for dentists.

Therefore, it is recommended that the special Committee on Continuing Education be continued during 1968-69 in order to discharge the function for which it was originally created.

#### Resolutions

This report is informational in nature and no resolutions are presented.

# DENTAL ASSISTANTS COMMITTEE

WILLIAM H. OLIVER, Chairman

A. P. CLINE, JR. CHARLES S. COOKE

Zyba K. Massey James M. Zealy

Meetings: The committee did not hold any formal meetings.

Liaison with NCDAA: The chairman met with officers and directors of the North Carolina Dental Assistants Association in Southern Pines on March 17, 1968.

#### Resolutions

This report is informational in nature and no resolutions are presented.

## DENTAL CARE FOR THE AGED COMMITTEE

WALTER H. FINCH, JR., Chairman

LAWRENCE H. PASCHAL W. H. GRAY, JR. ERVIN M. FUNDERBURK GUY V. HARRIS MILO J. HOFFMAN ALTON W. BOTTOMS

Meetings: The committee held no formal meetings, but had good communication by letters and telephone calls.

Activities: With the understanding that our work was to be with the N. C. State Department of Public Welfare dental program, the chairman met on November 15, 1967 with Mr. R. C. Howison, Jr., Chairman of the Board of Welfare; Col. Clifton M. Craig, Commissioner of Public Welfare; Mr. Emmett L. Sellers, Director of Medical Services, and Dr. J. A. Pearce, Dental Consultant. We went into this meeting to express the feeling of the members of this committee that the existing limited program of dental care should be expanded, not to a luxury program, but to a more comprehensive one under which participating dentists of the State could offer to MAA and OAA, and APTD recipients a "full program of dental care."

At the suggestion of Mr. Howison, a list of services desired with suggested fees was prepared for consideration by the Board of Welfare. Upon the recommendation of the Executive Committee of the NCDS, we met with the Board of Welfare on March 6, 1968 and recommended that the Department of Public Welfare expand the scope of dental care provided MAA, OAA, and APTD recipients to include all dental services listed on the North Carolina State Agencies' Fee Schedule of October, 1967. No final action was taken at this meeting, but we were promised that the question would be voted on at the next meeting of the Board.

## Resolutions

This report is informational in nature and no resolutions are presented.

## DENTAL CARE FOR THE AGED COMMITTEE

## Supplemental Report Number 1

The Dental Care for the Aged Committee is pleased to announce that subsequent to the filing of our original report, the Board of Public Welfare on April 28, 1968 acted favorably on the Committee's request for more comprehensive dental care programs for MAA, OAA, and APTD recipients.

Subject to approval by the Advisory Budget Commission the Board earmarked \$1,935,640 annually for dental services, beginning July 1, 1968. If the Budget Commission approves this request, the dental care program administered by the Department of Public Welfare will be expanded to include all procedures listed in the State Agencies' Fee Schedule adopted October 1, 1967, which is exactly what the Dental Care For the Aged Committee recommended to the Board of Public Welfare.

The Dental Care for the Aged Committee wishes to compliment the Board of Public Welfare, the Commissioner of Public Welfare and his staff for their realistic and forward thinking in this matter, which will enable the dentists of this State to render these old and disabled citizens a program of dental care that is as good or better than that provided similar groups in any state in the U.S.

It is recommended that the Dental Care for the Aged Committee be encouraged to continue its good relationship with the State Department of Public Welfare, offer assistance in setting up administrative details of this expanded dental care program, and encourage the dentists of this State to co-operate in an effort to render more comprehensive dental care to OAA, MAA, and APTD recipients.

#### Resolutions

This report is informational in nature and no resolutions are presented.

#### DENTAL CARE PROGRAMS COMMITTEE

EDWARD U. AUSTIN. Chairman

MOTT P. BLAIR R. A. DANIEL, JR. S. P. GAY FRANKLIN E. MARTIN

State Agencies' Fee Schedule: The committee met in Raleigh September 7, 1967, with appropriate State agencies and a member of the Department of Administration. At this meeting the fee schedule for dentistry for the various State agencies was reviewed and adjusted to a more realistic figure. It was agreed that the agencies would pay the prescribed fee that was scheduled, but efforts would be made through the Advisory Budget Commission to ask the General Assembly for sufficient funds to pay usual and customary fees to the participating dentists. In order to establish a sufficient budgetary item, the dentists over the State would be asked to submit a bill for their usual and customary fee, but would be paid according to the fee schedule. The figures taken from the usual and customary fees submitted will be analyzed, and it is hoped by the next Legislature to ask for sufficient funds to cover the usual and customary fee. This was approved by the Executive Committee and reported in letter form to the membership of the North Carolina Dental Society.

Title XIX: The committee met January 28, 1968 with the State Health Planning Agency in regard to the implementation of Title XIX of the Social Security Act in North Carolina. It is expected that the next Legislature will permit this program in our State. The committee, with the help of Dr. E. A. Pearson, Jr., State Dental Health Director, proposed to the Health Planning Committee a progressive program which would require fifteen years before final implementation of the full program of Title XIX. Before this plan was presented to the State Planning Commission, it was discussed with, and approved by, the Executive Committee of the North Carolina Dental Society tive Committee of the North Carolina Dental Society.

Blue Cross-Blue Shield Program: The committee met in Chapel Hill December 14, 1967, with the Blue Cross and Blue Shield Agencies of North Carolina in order to establish a dental prepayment plan to be marketed by Blue Cross and Blue Shield. At the time of the writing of this report, there was no definite agreement, but another meeting is expected in the near future.

It is expected that the Blue Cross and Blue Shield organizations of this State will ask the North Carolina Dental Society to provide a review committee. This committee would be a permanent committee of the North Carolina Dental Society. Its function would be to serve in liaison capacity with the Blues for implementation of dental prepaid programs,

establishment of fee schedules, and adjudication of claims.

## Resolutions

3. Resolved, that a permanent committee of the North Carolina Dental Society be established to be known as a review committee as recom-

mended by the American Dental Association, and be it further

Resolved, that this committee be made up of six members, one from
each geographical district and one member at large, and be it further

Resolved, that each member serve a three year term of office with the

two senior members rotating each year, and be it further Resolved, that the chairman of this committee be chosen by the committee.

## DENTAL EDUCATION COMMITTEE

C. W. SANDERS, Chairman (1969)

E. D. BAKER (1970) R. B. BARDEN (1971) F. A. BUCHANAN (1971) RALPH D. COFFEY (1969)

JAMES E. FURR (1972) S. P. GAY (1968) SANDY C. MARKS (1972) RILEY E. SPOON, JR. (1970)

PAUL A. STROUP, JR. (1968)

Meetings: The committee held no formal meetings during the past year.

Activities: Individual committee members participated in ground-breaking ceremonies for the new addition to the School of Dentistry on Saturday, September 23. The committee was well represented. Also, committee members were present and participated in the dedication ceremonies of the Dental Research Center on Sunday, October 15.

**Information:** Dean Bawden has informed the Dental Education Committee that the curriculum study relating to the new curriculum which will go into effect in 1969 is progressing exceedingly well.

The training program for auxiliary personnel under way in our community colleges is making satisfactory progress and one or more such training areas are being planned for the Western part of the State. Dean Bawden reports that the freshmen class for dental students will

Dean Bawden reports that the freshmen class for dental students will increase from the present 55 students to 60 in the Fall of 1969, and in 1970 will again be increased from 60 to the capacity number of 75. The dental hygienists class will number 30 in 1969, 45 in 1970, and in 1971 this class will be upped to 60. This process of a gradual increase in the number of dental students and dental hygiene students is necessary because the new basic science facilities are behind schedule. Therefore, it is necessary to enlarge classes gradually from 1969 to 1971.

because the new basic science facilities are behind schedule. Therefore, it is necessary to enlarge classes gradually from 1969 to 1971.

A much needed program for training teacher personnel in the fields of dental assisting and dental hygiene is getting under way this year both in the School of Dentistry and on the community college level. The committee lends encouragement to the School of Dentistry to conduct experimental programs in the expansion of duties of auxiliary personnel and to undertake a more comprehensive program in continuing education. This recommendation is supportive to similar statements submitted in reports from the Committee to Study the Dental Practice Act and the Committee on Continuing Education.

The Dental Education Committee would like to express the gratitude of the men in North Carolina dentistry to Dean James Bawden, the School of Dentistry, and to each individual who has made this tremendous advancement in dental education facilities a reality in our State.

#### Resolutions

This report is informational in nature and no resolutions are presented.

## COUNCIL ON DENTAL HEALTH

Francis A. Buchanan, Chairman (1970)

E. A. PEARSON, Jr. (1968) W. H. PRICE (1969) Norman F. Ross (1972) Horace K. Thompson (1971)

Correspondence: Members were kept informed through the mails and no meetings were held.

Dental Recruiting and Careers: Since 1964, Career Days have been held at the UNC School of Dentistry for prospective dental, dental hygiene, and dental assistant students. This year Career Day was held again at the UNC School of Dentistry in Chapel Hill, on March 9. Prior

to this date the council mailed a letter to each local society president urging him to inform members of his society to urge prospective students to attend.

Science Fair: Again this year the council authorized a contribution of \$100 to the North Carolina Academy of Science in support of Science Fairs sponsored by the Academy of Science. This sum was in the annual budget for this purpose.

Division of Dental Health: A summary report from the Division of Dental Health of the State Board of Health is attached. The committee commends Dr. E. A. Pearson, Jr., Director, and his staff for their significant achievements during the past year in public health dentistry.

#### Resolutions

This report is informational in nature and no resolutions are presented.

# SUMMARY REPORT DIVISION OF DENTAL HEALTH NORTH CAROLINA STATE BOARD OF HEALTH

May, 1967-May, 1968

E. A. PEARSON, JR., D.D.S. Director

Comprehensive Planning: In January, 1968, personnel of the Dental Health Division and members of the North Carolina Dental Society's Committee on Dental Care Programs, met with the staff of the office of Comprehensive Health Planning to discuss a plan to provide comprehensive dental care for all recipients of Title XIX benefits. The Dental Society will submit the proposed plan to the State Planning Task Force.

The Division of Dental Health assisted in the development of a dental examination and treatment voucher form to be used by all agencies and dentists participating in state-sponsored dental programs.

Residency Training: The Council on Dental Education of the American Dental Association advised the Dental Health Division that its residency training program had been granted preliminary provisional approval and was being listed under "Accredited Advanced Dental Education Programs for the Preparation of Specialists." A site visit evaluation is scheduled for 1968.

Continuing Education: A five-day conference for North Carolina public health dentists was held at UNC's Quail Roost Conference Center in August of 1967.

Most of the Dental Health Division staff attended continuing education courses held under the auspices of the UNC School of Public Health. Faculty for these courses came from the National Institute of Dental Research, the UNC Schools of Dentistry and Public Health, and the Dental Health Division.

Consultant Service: Members of the administrative staff served as consultants in various dental care programs sponsored through the Office of Economic Opportunity and the Elementary and Secondary Education Act; e.g., Head Start, Break-Through, Title I, Migrant Labor.

Education, Diagnosis and Treatment: For the year ending December 31, 1967, the 23 public health dentists employed by the Dental Health Division conducted programs in the schools of 40 counties. They inspected the mouths of 106,460 school children and treated 23,891 indigent children. These indigent children received the following services: 20,765 prophylaxes; 19,100 topical fluoride applications, and 20,828 amalgam

fillings. Public health dentists presented lectures on the care of teeth to 95,071 school children. The puppet show gave 364 performances for 100.533 school children.

The special summer program using senior dental students to provide dental care for underprivileged children was continued in 1967. This program was under the supervision of a staff dentist of the division.

Fluoridation: Fluoridation of municipal water supplies continued to chalk up gains during 1967. Three additional cities — Greensboro, Forest City, and Asheboro — joined the ranks of those municipalities adjusting the content of fluoride to their water supplies. Three additional town councils approved fluoridation. Of the population served by municipal or sanitary district water supplies, 71.2 percent is using water with adjusted fluoride.

**Research:** The study to test the effectiveness of two topical fluoride solutions in a non-fluoridated area continued for the third year, and the effectiveness of fluoride supplements in reducing dental decay in rural elementary school children was continued for the fifth year.

Planning was started for a school fluoridation research project. The purpose of this project is to study the effectiveness of providing fluori-

dation for school children in rural areas.

North Carolina Dental Program for Children: The Division of Dental Health has developed the plan for a dental program for children living in certain isolated areas of North Carolina. A grant application requesting federal matching funds to partly support this program will be submitted to the proper federal agency. It is anticipated that the results of the North Carolina program, if funded. will provide knowledge sufficient to contribute to the development of an acceptable National Dental Program for Children.

#### DENTAL HYGIENISTS COMMITTEE

M. W. CARPENTER, Chairman

J. HARRY SPILLMAN CHARLES A. REAP, JR. CHARLES T. BARKER MARVIN E. WALKER

Meetings: The committee held no meetings.

Assignments: The 1967 House of Delegates adopted the following resolutions. (Trans. 1967:p. 50):

"Resolved, that the Executive Committee request the Department of Community Colleges to increase the salary schedule of the directors of dental programs and their assistants to a level that would insure that properly trained faculty members be attracted and retained by these schools.

"Resolved, that the North Carolina Dental Society wholeheartedly reaffirms its support and intent to continue the School of Dental

Hygiene at the Guilford Technical Institute.

"Resolved, that the North Carolina Dental Society seek dental representation on the Boards of Trustees of all institutions under the Community College System engaged in educational programs for dental auxiliary personnel and that a copy of the resolution be directed to the parties responsible for such appointments."

Actions: During the past year the School of Dental Hygiene at Central Piedmont Community College received full accreditation. Wayne Community College and Guilford Technical Institute have received provisional accreditation from the Council on Education of the American Dental Association.

Central Piedmont Community College will graduate approximately 33 students this June. This institution is geared to accept from 40 to 44

qualified applicants each year.

Wayne Technical Institute became Wayne Community College on November 4, 1967. It has graduated 20 students during the past year and has presently 21 students in its freshman class. This institution is geared to accept 30 qualified applicants each year.

Guilford Technical Institute has graduated 43 students during this past year under the MDTA program. This institution expects to phase out of MDTA and be financed solely by State funds. It is hoped that a

new class will be started in September of this year.

UNC hygiene program has 15 students in each class, but this is to be expanded to 30 students in 1969, 45 students in 1970, and 60 students in 1971.

A teacher training course for dental hygienists and dental assistants with a background in education will be started in September, 1968 (class size, 10 students) at UNC. In 1969 this class size will be expanded to 20 students. The purpose of the above is to furnish teachers for the

community college courses.

The dental sub-committee of the North Carolina Department of Community Colleges has passed a resolution recommending salaries instead of commissions as the method of choice for compensation for dental hygienist services in a dental practice. The Board of Trustees of the Michigan State Dental Association took similar action last June. Our committee concurs, and an appropriate resolution appears at the end of this report.

#### Resolutions

- 4. **Resolved**, that the House of Delegates of the North Carolina Dental Society recommend that dentists compensate dental hygienists on a salary basis, rather than by commission.
- 5. **Resolved**, that no additional schools of dental hygiene be activated for the coming year in order that we may concentrate our efforts on improving those programs now underway.

#### DENTAL PRACTICE ACT COMMITTEE

W. L. HAND, JR., Chairman

ROGER E. BARTON THOMAS M. HUNTER FRANK O. ALFORD ROBERT B. LITTON

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Meetings: The committee met May 10 and September 23, 1967 and January 27, February 17, and March 14, 1968.

Assignments: The Legislative Committee in a report to the Executive Committee January 7, 1967, recommended that a study in depth of the present dental practice laws be initiated. The Executive Committee on January 7, 1967 directed the president to appoint a special committee to study the present dental practice act in co-operation with the State Board of Dental Examiners and report to the House of Delegates.

Report of Study: To render a contributing service to our profession and to follow the direction given this committee, it was decided by the committee that a full and comprehensive study be initiated utilizing the thoughts, efforts and contributions that could be available through members of sub-committees. Sub-committees were appointed in Dental Assisting, Dental Hygiene, Dental Laboratories and Dental Laboratory Technicians, Specialty Licensure and General Dentistry. Copies of sub-committee reports are appended to this report.

#### Resolutions

10. Resolved, that the study of dental laws in North Carolina be continued by the committee and sub-committees as now constituted.

11. **Resolved,** that the State Board of Dental Examiners be requested to consider amending its rules and regulations pertaining to dental assistants to include the recommendations in the report of the Subcommittee on Dental Assisting.

# DENTAL PRACTICE ACT COMMITTEE—APPENDIX NO. 1 SUB-COMMITTEE ON DENTAL HYGIENE

ROBERT H. SAGER, Chairman

MISS ELEANOR A. FORBES
J. HARRY SPILLMAN

Mrs. Carolyn C. Williams James H. Lee

Meetings: The Dental Hygiene Committee met November 11, December 6, and January 27, 1968.

Assignment: To study the Dental Practice Act as it relates to dental hygiene and make recommendations for any changes in the General Statutes of North Carolina or regulations in the best interest of the dental and dental hygiene profession. A resolution passed by the Fifth District Dental Society and referred by the 1967 House of Delegates to the Dental Practice Act Committee requesting a change be made in the regulations permitting a dentist to have more than one hygienist, was referred to the Sub-committee on Dental Hygiene.

**Results of Study:** Interim reports have been received and studied by the State Board of Dental Examiners, the legal counsel for the Board and by the parent committee. Definite recommendations will be presented when the report is finalized.

**Recommendations:** This report is informational in nature and no recommendations are presented.

# DENTAL PRACTICE ACT COMMITTEE—APPENDIX NO. 2 SUB-COMMITTEE ON DENTAL LABORATORIES AND DENTAL TECHNICIANS

JOHN B. SOWTER, Chairman

JAMES A. HARRELL C. Z. CANDLER PEARCE ROBERTS, JR. MR. FRED HORTON

Mr. Robert Gunter

Meetings: The committee met February 17 and March 9, 1968.

Assignment: To study the Dental Practice Act as it relates to the dental laboratory technician and the dental laboratory and to make recommendations for any changes in the General Statutes of North Carolina or the regulations for the best interest of dentistry, dental laboratories and dental technicians.

**Report of Study:** Definite recommendations will be made following a comprehensive evaluation of all factors involved.

**Recommendations:** This report is informational in nature and no recommendations are presented.

# DENTAL PRACTICE ACT COMMITTEE—APPENDIX NO. 3 SUB-COMMITTEE ON SPECIALTY LICENSURE

OLIN W. OWEN, Chairman

J. B. FREEDLAND

EDWARD U. AUSTIN

Meetings: This committee met September 23, 1967 and January 27, 1968.

Assignments: To study the Dental Practice Act as it relates to the specialties and to recommend any changes in the General Statutes of North Carolina or regulations for the best interest of the profession.

**Reports of Study:** Two interim reports have been submitted and recommendations will be made following completion of the study.

**Recommendations:** This report is informational in nature and no recommendations are presented.

# DENTAL PRACTICE ACT COMMITTEE—APPENDIX NO. 4 SUB-COMMITTEE ON GENERAL DENTISTRY

RALPH D. COFFEY, Chairman

M. W. CARPENTER T. G. COLLINS R. A. GEORGE PAUL E. COTTER JAMES L. COX C. W. HORTON

Assignment: To study the Dental Practice Act as it relates to general dentistry and to recommend any changes in the General Statutes of North Carolina or regulations for the best interest of dentistry.

**Report of Study:** Recommendations will be made at the completion of the study.

**Recommendations:** This report is informational in nature and no recommendations are presented.

# DENTAL PRACTICE ACT COMMITTEE—APPENDIX NO. 5 SUB-COMMITTEE ON DENTAL ASSISTING

BENNIE D. BARKER, Chairman

ROGER E. BARTON

MISS EDNA ZEDAKER

Meetings: This committee met June 10, July 15, August 18, and September 23, 1967 and January 27 and March 14, 1968.

Assignment: To study the Dental Practice Act as it relates to dental assisting and to make recommendations for the best interest of the dental profession and dental assistants.

Reports of Study: In order to meet the increasing demands placed upon dentistry, it is necessary that new systems of delivery of dental health care be developed. One means of increasing the productive capacity of the dentist is the utilization of well trained auxiliaries to assume responsibility for the performance of certain functions now, relegated to the dentist. However, if the best interests of the public and profession are to be served, it is essential that delegation of these functions be made to specific personnel based on their education, training and experience. Provided the dental assistant is to perform functions which would otherwise be performed by the dentist, it is necessary that the skill of the dental assistant in these areas be comparable to that of the dentist, if quality of dental service is to be maintained. Therefore, selectivity based on educational standards is essential.

The committee senses a certain degree of urgency associated with encouraging the profession to increase the utilization of auxiliary personnel and a great sense of responsibility in assuring the profession and the public that explicit standards must be followed in delegation of functions. Toward these goals the committee has essentially requested permissive action be placed in the Rules and Regulations rather than changes in the General Statutes of North Carolina, and that delegation of functions be based on the education, training, and experience of the dental assistant.

The committee believes that the well-being of the profession and the public will be maintained by the implementation of reasonable standards

for the dental assistant.

The committee feels that the recommendations suggested are reasonable, justifiable, and do not impose undue hardships on the practicing dentists or the State Board of Dental Examiners. They will be beneficial to the dental assistant in several ways, and are in the best interest of the profession's obligation to the health and welfare of the public.

Addenda with full background information is on file at the Central Office. Copies may be obtained from Mr. Cunningham, Dr. Bennie D. Barker, Chairman of the Sub-committee on Dental Assisting or Dr. W. L. Hand, Jr., Chairman of the Dental Practice Act Committee.

Recommendations: In order to maintain high standards of dental health care as well as increase the profession's delivery capacity, the committee recommends the following for inclusion in the Rules and Regulations governing the practice of dentistry in North Carolina.

1. Dental Assistants to be designated in one of two categories (I and II)

based on their education, training and experience.

- 2. **Dental Assistant I—Defined:** A dental assistant who has not completed an accredited (Council on Dental Education, ADA) education and training program or who is not certified or certification eligible by the Certifying Board of the American Dental Assistants Association, or has not been employed as a dental assistant for three or more successive years.
- 3. Dental Assistant I—Functions: The Category I dental assistant may perform those functions which are generally ascribed to the dental assistant (housekeeping, reception, telephone and appointments, business management, laboratory procedures, and assisting in operatory procedures which do not require the professional education and skill of a dentist). It is illegal for a Category I dental assistant to perform any intro-oral procedures except in a joint effort with the dentist in providing dental services to the patient.
- 4. Dental Assistant II—Defined: A dental assistant who has completed an accredited (Council on Dental Education, ADA) education and training program, or who is certified or certification eligible by the Certifying Board of the American Dental Assistants Association, or who has been employed as a dental assistant for three or more years would be designated as a Category II dental assistant. Ten (10) years subsequent to the inclusion of recommendation No. 4 in the Rules and Regulations, designation of Dental Assistants in Category II would be limited to those individuals who have completed an accredited (Council on Dental Education, ADA) education and training or are certified or ertification eligible by the Certifying Board of the American Dental Assistants Association.
- 5. Dental Assistant II—Function: The Category II dental assistant nay perform any and all functions ascribed to the Dental Assistant I. In addition, licensed dentists are permitted to delegate appropriate functions, including the taking of X rays, topical fluoride applications and application of topical anesthetics, only to those individuals who qualify for Dental Assistant II designation. These delegated functions must be performed under the direct supervision of the dentist (direct super-

vision means that the dentist is in the office at the time the procedure is accomplished). Those functions considered *inappropriate* for delegation are:

A. Examination, diagnosis and treatment planning.

B. Cutting or surgical procedures on hard and soft tissues.

C. Those restorative, prosthetic, orthodontic, and other procedures which require the professional education and skill of the dentist; and, which directly affect the dental health and physiologic well being of the patient.

D. Decisions as to drugs and their dosage, prescription writing and

work authorizations.

# DENTAL SERVICE CORPORATION COMMITTEE

ROY L. LINDAHL, Chairman

GLENN F. BITLER F. A. BUCHANAN JOHN H. DIXON CHARLES P. GODWIN JAMES B. HOWELL R. S. HUNTER PEARCE ROBERTS, JR. FREEMAN C. SLAUGHTER

JAMES M. ZEALY

Meetings: The committee met on October 14, 1967.

Assignments: The 1967 House of Delegates adopted the following resolution (Trans. 1967:64):

"Resolved, that upon favorable action by the General Assembly of the State of North Carolina to amend G.S. 55 A-3, application be made for approval by the Insurance Commissioner and Secretary of State leading to the incorporation of a Dental Service Corporation."

General Assembly Action: The General Assembly passed the necessary legislation to remove the reason for delay in the development of the dental service corporation. Subsequent to this action the chairman of the committee and the executive secretary of the Society met with legal counsel to determine future steps to be taken. It was agreed that legal counsel would draw up articles of incorporation which would include a statement that the corporation would initially limit its activity to acting as a fiscal intermediary and would later develop sample contracts for private groups.

Committee Activities: During a meeting of the full committee Mr. R. C. Howison, Jr., legal counsel, informed the group that initial contact with the Insurance Commissioner's office indicated that it would be necessary to provide sample contracts prior to obtaining approval to incorporate as a dental service corporation. Following the discussion of several alternatives, the committee requested Mr. Howison to proceed with the articles of incorporation at the earliest practicable date with the inclusion of sample contracts. In order to permit the development of such a contract to provide a usual and customary basis for fee payment it will require a compilation of a "confidential profile of fees." This will be obtained by the committee and will be tabulated by a statistician knowledgeable in this area who is employed by California Dental Service.

Other Activities: At the request of the committee Mr. Herbert C. Lassiter, executive vice president of the National Association of Dental Service Plans, travelled to Raleigh to meet with Mr. Howison, the executive secretary, and the chairman of the committee. During the meeting legal technicalities and other technical information was discussed. This meeting was most fruitful for our legal counsel, for Mr. Lassiter, also an attorney, was able to communicate in legal terms with the benefit of a knowledge of dental terminology.

In order to gain more information concerning the operation of a dental service corporation, the chairman of the committee has visited the offices of California Dental Service, Colorado Dental Service, Illinois Dental Service and the National Association of Dental Service Plans at no cost to the Society.

A supplemental report will be filed.

# Resolutions

This report is informational in nature and no resolutions are presented.

#### DENTAL SERVICE CORPORATION COMMITTEE

# Supplemental Report Number 1

The Dental Service Corporation Committee is continuing to develop plans to establish the North Carolina Dental Service Corporation. It is hoped that this organization will be activated in the near future.

Review Committee: One of the necessary adjuncts to the successful operation of all prepaid insurance plans is a review committee structure. This structure has been recommended by the House of Delegates of the American Dental Association. In the Guidelines for Review Committees, adopted by the ADA House of Delegates during its annual session in November, 1967, each committee is recommended to serve in review for all insurance carriers who write dental prepayment plans. Therefore the committee wishes to present the following resolution:

#### Resolutions

18. **Resolved,** that the North Carolina Dental Society create a Review Committee as a standing committee, or assign review committee responsibilities to another appropriate standing committee, to serve all dental prepayment plans.

#### ETHICS COMMITTEE

JOSEPH M. JOHNSON, Chairman (1972)

C. Z. CANDLER (1969)C. W. HORTON (1968)

ELLIOT R. MOTLEY (1970) DARDEN J. EURE (1971)

**Meetings:** The committee held no formal meetings. Business of the committee was conducted by mail and by phone.

Assignments: The committee received no assignments from the 1967 House of Delegates. Several requests for information and rulings were received and resolved on the district level. The chairman lectured one class period to the Senior Class at UNC School of Dentistry on the Code of Ethics.

Credit Cards: In its report to the 1967 House of Delegates, the ADA Judicial Council issued a statement on the application of the Principles of Ethics of the American Dental Association to the participation of dentists in bank credit card plans. The statement in full was published in the January issue of The Journal of the North Carolina Dental Society.

Copies of the statement were sent to banks in North Carolina which operate credit card plans.

#### Resolutions

This report is informational in nature and no resolutions are presented.

# INDUSTRIAL COMMISSION COMMITTEE

S. Byron Towler, Chairman

JAMES A. PRIVETTE

NORMAN F. Ross

S. L. BOBBITT

Fee Schedule Revised: The Industrial Commission Committee is pleased to report that a revision of the dental fees and services schedule pertaining to the North Carolina Workmen's Compensation Act has been effected. This revision of fees and services is included in the new 1967 fee schedule issued by the North Carolina Industrial Commission. Substantial increases have been provided in most segments of the schedule to bring the fees in line with those which the Commission considers reasonable and generally charged over the State.

## Resolutions

This report is informational in nature and no resolutions are presented.

# INSURANCE COMMITTEE

J. S. D. Nelson, Chairman (1968)

T. L. BLAIR (1969) W. A. MYNATT (1970) John S. Dilday (1971) Donald L. Henson (1972)

Meetings: The committee met informally at Pinehurst at the 1967 annual session, and on January 28, 1968.

Assignments: The committee was requested to investigate the amount of interest in a group office overhead insurance program; and, deeming it sufficient, review reputable companies offering this type program with the objective of recommending one to the Executive Committee for approval. The committee was also requested to make recommendations for the better administration of the various group plans now in effect.

Group Overhead Business Expense Insurance: During the summer of 1967 in two subsequent *Newsletters*, the membership was asked to express its interest in a tax deductible office overhead group insurance plan. One hundred sixteen affirmative answers were received which seemed sufficient to make worthwhile the investigation and screening of leading companies in this field. On January 28, 1968 the Insurance Committee met, considered plans of five companies, and voted unanimously to recommend Mutual of Omaha as the carrier for an NCDS Office Overhead Group Insurance Plan.

Retirement Program: Guidelines were agreed upon for the Retirement Program which, if followed, will prevent any legitimate conflict with the administration of the other, presently approved, NCDS group insurance plans.

Guidelines for the administration of all group programs with regard to eligibility for participation were drawn up and will be submitted to the Executive Committee for approval since it involves NCDS general

policy on membership. A copy is appended to this report.

It has been noted that it is not clear whether Major Medical and Hospital Programs, now in effect, will cover confinement in transient institutions, i.e., recuperative centers or nursing homes. The chairman was instructed to obtain from the concerned companies clarification of this matter with the following results:

INA Major Medical has not at present formulated an over-all policy

but is dealing with each case individually.

Hospital Rider to the Disability Insurance, and the Hospital Income Plans, both by Commercial Insurance Company of Newark, New Jersey will pay benefits when the insured is an "in patient" in a hospital

(other than a convalescent, nursing or rest home, or any facility contracted for or operated by the Federal Government for treatment of members or ex-members of the Armed Forces). Such hospital must have a laboratory, a registered nurse always on duty, and an operating room where surgical operations are performed by a duly licensed physician or surgeon.

#### Resolutions

This report is informational in nature and no resolutions are presented.

### INSURANCE COMMITTEE

### Appendix 1

The following Guidelines for Group Programs was approved by the Insurance Committee on January 28, 1968.

### Guidelines for Group Programs

Group insurance and retirement programs sponsored by the Society are a privilege and benefit of membership in the Society and participation in them will be limited to Society members. Administrators of Society-sponsored group programs are requested to carefully observe and comply with these guidelines:

(1) The Central Office of the North Carolina Dental Society shall submit annually to administrators of Society-sponsored group insurance and retirement programs a roster of members in good standing, and shall notify them of any changes in the status of

members as they occur.

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(2) No individual will be enrolled in a Society-sponsored insurance or retirement program unless his name appears on the official roster of the Society as a member in good standing or on subsequent amendments to that roster except as noted in paragraph 3.

(3) If an applicant is not a member in good standing, but has applied for membership, his name will be submitted to the Central

Office for approval.

(4) If the Central Office determines that a non-member applicant for enrollment in a Society-sponsored insurance or retirement program has filed a complete application for membership with the proper District, the Central Office will approve the applicant for enrollment in a Society-sponsored program subject to election to membership at the next annual District meeting, provided that no non-member applicant will be approved for participation unless he is applying for membership for the first time, or he is a former member who resigned to fulfill his military obligation or enter full-time graduate study.

(5) Administrators will submit annually to the Central Office a list of those currently enrolled in Society-sponsored group programs and will notify the Central Office of any changes or additional en-

rollments as they occur.

### INSURANCE INDUSTRY LIAISON COMMITTEE

JAMES B. HOWELL, Chairman

J. B. FREEDLAND

CHARLES H. SUGG

C. Don Gerdes

**Meetings:** The committee held meetings on January 21, 1968 and on March 20, 1968.

Assignments: The 1966 House of Delegates adopted the following resolutions:

"Resolved, that the North Carolina Dental Society Committee on Dental Health Insurance Industry Liaison take action with the

North Carolina Committee for Health Insurance Council forming a committee to evaluate policies and claims arising from either source and to recommend solution for same.

"Resolved, that the committee function as an advisory group and s

have no policing powers."

Results of Study: A statement of the philosophy of the Health Insurance Council toward insured dental care coverage was reviewed.

The guidelines for dental societies to use in establishing a review committee that was approved by the House of Delegates of the American Dental Association was reviewed. This statement of guidelines has been sent to the Dental Care sub-committee of the Allied Health Services of the Health Insurance Council for their consideration to accept or reject.

This committee has been in contact with Cristie D. Harding, Assistant Director of the Health Insurance Council and with Dr. H. Frank Starr, Chairman of the Health Insurance Council for the State of North Carolina for information and co-operation in carrying out the assignment of this committee. At a joint meeting of this committee with Mr. J. S. Kilpatrick, Chairman of the sub-committee of North Carolina Health Insurance Council to deal with Dental Health problems, it was agreed that a joint review committee was advisable for the mutual benefit of both parties. both parties.

Since these guidelines are the official recommendations of the American Dental Association, this committee recommends that a review committee with the North Carolina Dental Society be set up in accordance

with these recommendations.

At the March 20 meeting with Dr. H. Frank Starr and Mr. J. S. Kil-At the March 20 meeting with Dr. H. Frank Stair and Mr. J. S. Klipatrick, Chairman and Dental Sub-chairman of the Health Insurance Council, it was learned that the Health Insurance Council of the Insurance Industry voted to accept the guidelines for forming a review committee as recommended by the American Dental Association. This gives the two committees a clear cut basis for immediate action to set up a joint review committee.

The members of this joint meeting agreed that education of the insurance industry in dental procedures was very necessary, especially in periodontics, orthodontics and other preventive dentistry procedures. It was thought also that the insurance representatives could enlighten the

dental profession in insurance matters.

Since the original resolution gave to this committee the authority to set up a joint liaison with the Health Insurance Council no further reso-

lution is necessary.

In the re-appointment of this committee, consideration should be given to distribution of the members by the type of dentistry and geographic areas. However, the difficulty of the assembly of a widely dispersed committee must be considered. Availability of consultants to the committee might be a way to reduce the size of the group.

This group will act immediately to form a joint liaison committee

with the Health Insurance Council.

### Resolutions

This report is informational in nature and no resolutions are presented.

### LEGISLATIVE COMMITTEE

MOTT P. BLAIR, Chairman (1969)

H. ROYSTER CHAMBLEE (1970) L. C. Holshouser (1968) Paul E. Jones (1971) C. B. TAYLOR (1972)

Meetings: No formal meetings of the committee were held as the North Carolina General Assembly was not in session.

Assignments: The committee received no specific assignments from the 1967 House of Delegates.

Liaison: Some Congressional liaison members were called upon to

contact their Congressmen at the request of ADA.

Plans for effective liaison with members of the 1969 General Assembly are under way. Liaison is being established with candidates for Governor and Lt. Governor so that dental society lines of communication will be set after election.

### Resolutions

This report is informational in nature and no resolutions are presented.

### LIBRARY AND HISTORY COMMITTEE

NEAL SHEFFIELD, Chairman (1968)

C. E. ABERNETHY (1972) FRANK O. ALFORD (1969) M. M. LILLEY (1971) S. H. STEELMAN (1970)

The Library and History Committee has not been active during the year on any new projects. We welcome any suggestions that may be offered that come within the scope of our committee.

### Resolutions

This report is informational in nature and no resolutions are presented.

### MEMBERSHIP COMMITTEE

COLIN P. OSBORNE, JR., Chairman

JAMES L. COX M. LAMAR DORTON JAMES B. HOWELL HAROLD E. MAXWELL

WILLIAM A. MYNATT

Membership 1967: As of December 31, 1967 we had 1,401 members in good standing, a net gain of 47 members during the year as shown below:

Membership, December 31, 1966	1,354
New members 79	
	00
Reinstated Members 3	82
<del>-</del> -	
	1,436
Losses	,
Deceased 18	
Resigned 11	
Transferred 2	
Dropped from roll 4	35
Membership, December 31, 1967	1,401

Of the eleven members who resigned, eight resigned to enter full-time graduate study and accept student memberships directly from the ADA.

Four members were dropped from the roll for non-payment of dues and an appropriate resolution appears at the end of this report.

Two members transferred to other constituent societies, one to California and one to Florida.

Membership by Districts follows:

District	Active	Life	Total
1	250	24	274
$\overline{2}$	312	48	360
3	294	31	325
4	195	27	222
5	180	40	220
	1.231	170	1.401

**Retired Roll:** On December 31, 1966 there were 7 members classified as retired members. During the year one died, leaving 6 members on the retired roll on December 31, 1967.

**ADA Life Members:** Seven members qualified for ADA Life membership during 1967. They were: Vernon H. Cox, Winston-Salem; William I. Hart, Edenton; R. H. Holliday, Thomasville; R. S. Jones, Warrenton; L. G. Page, Yanceyville; F. N. Pegg, Kernersville; Herbert Spear, Kinston.

On December 31, 1966 there were 175 ADA life members. During 1967 six were added and nine died, leaving a total of 173 ADA life members

on December 31, 1967.

Membership 1968: Since January 1, 1968, one member has died, and two have resigned, and one has transferred to Georgia, leaving a total membership of 1,397. Of that number 1,378 are in good standing and 21 are delinquent. A breakdown by Districts as of April 8, 1968 follows.

District	Active	Life	Delinquent	Total
1	246	23	4	273
2	307	48	5	360
3	284	31	7	322
4	192	27	3	222
5	178	40	2	220
	1,207	169	21	1,397

If we follow the normal pattern of gains and losses during 1968, it is estimated membership will total about 1,450 by December 31.

### Resolutions

9. **Resolved**, that it be made a matter of record that the following did not pay 1967 dues by December 31, 1967 and have been dropped from the roll according to Article VI, Section 6 of the *Bylaws*:

First District—W. B. Masters, Bakersville Second District—Donald J. McGowan, Charlotte R. R. Shoaf, Lexington Third District—Jerry L. Corbin, Greensboro

### MILITARY AND VETERANS AFFAIRS COMMITTEE

T. Edwin Perry, Chairman (1968)

COYTE R. MINGES (1969) CAREY T. WELLS, JR. (1971)
BAXTER B. SAPP, JR. (1970) W. F. YELTON (1972)

Meetings: The committee met with the Medical Director and the Director of Dental Service, Regional Office, Veterans Administration, in Winston-Salem, N. C. on April 5, 1967, and on May 11, 1967 in Pinehurst.

Assignments: The North Carolina Dental Society Constitution and Bylaws provide in Article II, Section 17, that "the Military and Veterans Affairs Committee shall review and study the professional problems of the armed forces of the United States, including the Veterans Administration, and formulate programs for participation of dentists in civil defense."

The Executive Committee of the North Carolina Dental Society on September 18, 1966 considered a request that the Veterans Administration fee schedule, in force since 1959, be revised. The request was referred to the committee on Military and Veterans Affairs for appropriate action. Negotiations between this committee and the Veterans Administration.

field stration were still in session at the year's end, and were continued by

Committee Action: A study was made of available fee schedules in force in North Carolina by Federal and State agencies, and a comparison made between the existing VA fee schedule for North Carolina and bether states. A new upgraded fee schedule for North Carolina was presented at the meeting on April 5, 1967. The Veterans Administration regional dental and medical representatives present informed the committee that the Veterans Administration Central Office looked with disavor on a change of negotiated fee schedules, unless they were substantiated by a complete fee survey of all the practitioners of the State involved. The VA presented as an alternate, the Basic Dental committee was of the opinion that a great deal of time and unnecessary energy would be expended in canvassing the dental practitioners of the State, and that the results of past canvasses had proved worthless. The committee agreed to take the VA proposal under study and on a later bolling by the chairman, the committee chose to recommend that the VA Central Office put into effect in North Carolina the Basic Dental Fee Schedule of the Veterans Administration. The VA Central Office accepted the recommendation, and a letter from VA Regional Office, lated January 5, 1968, stated that the Basic Fee Schedule becomes effective July 1, 1968.

Recommendation: It is recommended that the subsequent Military and the Veterans Affairs Committees be instructed to continue reviewing the Basic Fee Schedule, and give study to the Michigan State Dental Association policy relative to VA fee schedules.

Committee Action: On the recommendation of constituent dental organizations in involved areas, and with concurrence of the Military and Veterans Affairs Committee, the Executive Secretary's office informed three military establishments in the State during the 1967-68 year that their installation was not considered "remote" by the Society. The installations so notified were the 701st Radar Squadron (SAGE) (ADC), Fort Fisher Air Force Station, Kure Beach, N. C.; 810th Radar Squadron, Winston-Salem Air Force Station, Winston-Salem, N. C.; 632 Radar Squadron, Roanoke Rapids Air Force Station, Roanoke Rapids, N. C. The term "remote" has reference to the Dependent Medical Care Act of 1956, as amended by P. L. 89-614 which provides for routine intal care for military dependents at stations where adequate civilian facilities are not available.

### Resolutions

This report is informational in nature and no resolutions are presented.

### COMMITTEE ON THE PRESIDENT'S ADDRESS

FRANK G. ATWATER, Chairman

WALTER H. FINCH, JR.

in

C. B. TAYLOR

The Committee wishes to commend President Kirkland on a well prepared and thought provoking paper. He does not minimize the credit due his various committees as he points out the splendid work they accomplished during the past year. President Kirkland shows foresight, vision, and wisdom in his realistic report regarding the increasing demands facing dentistry today. He stood firm in backing his recommendation that we accept with an open mind this socialistic reform as it begins to alter our present day concept of the practice of dentistry. Yet we heed his warning to prepare ourselves to be able to render the best service possible to mankind during these changing times.

### PROSTHETIC DENTAL SERVICE COMMITTEE

C. Z. CANDLER, Chairman (1969)

THOMAS L. DIXON (1971) HORACE P. REEVES, JR. (1972)

C. D. EATMAN (1970)C. P. OSBORNE, JR. (1968)

Relations with NCDLA: The Prosthetic Dental Service Committee has enjoyed another year of good relations with the North Carolina Dental Laboratory Association and the committee feels that significant strides are being made toward cementing good relations between these two groups.

The members of the NCDLA state most emphatically that they do not desire to deal with the public either directly or indirectly and are most

anxious to convey their attitude to the members of NCDS.

It has been proposed that local dental society groups throughout the State extend invitations to laboratory groups within a particular area to attend scientific programs or any other program instituted by these dental societies which might be of significant value and interest to the laboratory group. Therefore, in Greensboro, on March 9, 1968, your committee met in joint session with the Prosthetic Service Committee of the NCDLA and the sub-committee on Dental Laboratories and Dental Technicians, with emphasis being on the above paragraphs, and the following resolutions are submitted for your consideration.

### Resolutions

- 6. Resolved, that the Prosthetic Dental Service Committee be encouraged to continue in its efforts to further the good relations now existing between the NCDS and the NCDLA.
- 7. Resolved, that local dental society groups be encouraged to issue invitations to laboratory personnel within the area of these groups to attend clinics and seminars which would be of mutual benefit.
- 8. Resolved, that the omission of dental laboratory listings in the Yellow Pages of the telephone directories be continued as in the past.

### RELIEF COMMITTEE

J. WILLIAM HEINZ, Chairman (1969)

S. L. BOBBITT (1970) W. H. BREELAND (1971)

H. W. GOODING (1972) J. T. LASLEY (1968)

Meetings: The committee met Thursday, May 11, 1967.

Assignments: One of the primary responsibilities of this committee is to consider applications for relief grants. At the time of the meeting there were no applications for grants, and there were no current grants.

**Investigation:** At the meeting in May, the committee decided to have future applicants investigated by private investigators.

New Applications: As of March, 1968, one application has been approved by the State committee and sent on to the ADA for approval.

### Resolutions

This report is informational in nature and no resolutions are presented.

### COMMITTEE ON RULES AND ORDER

PENN MARSHALL, JR., Chairman

JAMES H. EDWARDS

WALTER H. FINCH, JR.

H. E. MAXWELL

Speaker of the House: Article III, Section 6 of the Bylaws provides that: "The Speaker of the House shall preside at all meetings of the House of Delegates and shall determine the order of business for all meetings subject to the approval of the House of Delegates and shall perform such other duties as custom and parliamentary usage require. The decision of the Speaker shall be final unless an appeal from decision shall be made by a member of the House in which case final decision shall be by majority vote."

The above provision is interpreted by this committee to include authority of the Speaker to appoint a parliamentarian and such committees of the House as he deems necessary to expedite business. Further, the committee recommends that the Speaker be granted a vote only

in case of a tie.

Adoption of Agenda: The committee submits the agenda on pages iii and iv (blue sheets) for this session of the House of Delegates and recommends its approval as the official order of business.

Voting Procedures: The method of voting in the House will usually be indicated by the Speaker in the call for the vote: voice vote, hand vote, or rising vote. When a rising vote is called for, delegates are asked to remain standing until the count has been completed and the Speaker indicates that the voters may be seated.

A 90 per cent vote shall be interpreted as requiring 90 per cent of all legal votes cast.

A two-thirds vote shall be interpreted as requiring two-thirds of all legal votes cast.

Recognition of Those Wanting to Speak: When a member wishes to address the House, he should secure the attention of the Speaker and not begin to speak until he has been recognized by the Chair. He should then state his name and his district for the benefit of the recorder.

Access to the Floor: Access to the floor of the House will be permitted only to Delegates, Officers, and Staff. Alternate Delegates and members of the Society will be seated in a special section of the House.

Attendance of Representatives of the Press: Members of the House will wish to be guided in their deliberations and debate by the knowledge that representatives of the press may be in the visitors gallery.

Introduction of New Business at Last Meeting: No new business, except the Report of the Clinic Board of Censors, shall be introduced into the House of Delegates at the final meeting of the House, unless by unanimous consent. Approval of such business shall require unanimous vote.

Privilege of the Floor: Article III, Section 6 of the Bylaws provides that: "Chairmen and members of committees who are not members of the House of Delegates shall have the right to participate in the debate of their respective reports, but shall not have the right to vote."

At the discretion of the Speaker, with the approval of the House, privilege of the floor may be granted to any member of the Society

and Staff.

Minority Report: Attention is called to Article III, Section 2 of the Bylaws which states: "Ten members of the House of Delegates may file a minority report dissenting from the action of the House of Delegates and appeal to the General Session of the Society.'

Reference Committees: All reports and resolutions of committees, except amendments or alterations to the Constitution and Bylaws, matters of ethics, and recommendations of the President, may be referred to reference committees appointed by the Speaker.

The standing Committee on Constitution and Bylaws will constitute is

the reference committee on amendments and alterations to the Con-

stitution and Bylaws.

The standing Committee on Ethics shall constitute the reference com-

mittee on all matters pertaining to ethics.

The special Committee on the President's Address will constitute the reference committee on recommendations of the President.

Roll Call: The roll will be called by the Secretary-Treasurer at the beginning of each meeting. For the record, those answering the roll at that time will constitute the Delegates in attendance for the meeting. No substitutions for Delegates will be made after the roll call, except by request of the floor chairman of the delegation concerned.

Floor Chairmen: District delegations shall elect a floor chairman (unless he is designated by the District Bylaws) and report their names to the Secretary prior to the second meeting of the House. The Floor Chairman will designate the delegates to comprise the delegation from his district for each meeting of the House of Delegates.

Seating of Delegates: Delegates are requested to seat themselves according to the floor plan of the House. This will enable the Speaker to recognize and identify any delegate who wants to speak.

Disposition of Reports: All reports will be referred to a reference committee by the Speaker of the House. The reference committee, after evaluating a report, must advise the House to adopt, amend, postpone, or reject all resolutions presented in the report. If no resolutions are presented in the report, the reference committee will present the report to the House of Delegates with appropriate comments and a motion that the report be filed for information and printed in the Transactions. A reference committee may not "pigeon hole" any item, but must refer it to the House of Delegates for final action.

### Resolutions

- 13. Resolved, that the agenda on pages iii and iv (blue sheets) be adopted as the official order of business for this session of the House of Delegates.
- Resolved, that the list of referrals submitted by the Speaker of the House of Delegates be approved.
- 15. Resolved, that the report of the Committee on Rules and Order be adopted, and be it further

Resolved, that the report of the Committee on Rules and Order constitute the rules for the proper conduct of business at this session of the House of Delegates.

### SCHOOL HEALTH COMMITTEE

GLENN L. HOOPER, Chairman

L. P. MEGGINSON, JR. G. SHUFORD ABERNETHY Dennis S. Cook DONALD L. HENSON

**Meetings:** No formal committee meetings have been held.

State Fee Schedule: Pursuant to action by the 1967 House of Delegates, President Kirkland appointed a Dental Care Programs Committee to

inegotiate with all State agencies for payment of all required dental services on the basis of usual and customary fee. In the event the State would not agree to reimburse dentists on a usual and customary iee basis, then the committee was authorized to develop a State-wide comprehensive fee schedule.

Dr. E. U. Austin was designated chairman of this special committee.

The Executive Committee directed that in negotiations with State agencies the chairman of the School Health, Dental Service Corporation and Insurance Industry Liaison Committees be invited to participate.

The chairman of the School Health Committee joined with the Dental Care Programs Committee when it met with representatives of appropriate State agencies on September 7, 1967. It was determined at this meeting that reimbursement of dentits on a usual and customary are basis would be unacceptable at this time. ee basis would be unacceptable at this time. It was pointed out that by law reimbursement for dental services under the School Health Program must be made on the basis of a uniform fee schedule.

At this meeting a uniform State-wide fee schedule was agreed upon. It was subsequently approved by the State Budget Officer and became effective October 1, 1967. The fee schedule now applies to dental programs administered by the School Health Coordinating Service, the Department of Public Welfare, the Commission for the Blind, and the

Division of Vocational Rehabilitation.

It was agreed that dentists would bill their usual and customary fee or authorized services but that payment would be made on the basis of the new uniform fee schedule. This will enable the State to obtain that an which to base estimates of additional funds required by the 1969 Legislature for reimbursement on a usual and customary fee basis. Copies of the new uniform fee schedule were sent to all dentists in

the State by the Central Office on October 5, 1967.

Title XIX. On January 18, 1968 the Dental Care Programs Committee met with Dr. Charles M. Cameron, director, Office of Comprehensive Health Planning, members of his staff, and representatives of the Department of Mental Health, Public Welfare, Board of Health and the Division of Vocational Rehabilitation. It was the purpose of the meeting to discuss dentistry's role in the implementation of Title XIX of the Social Security Act. The committee was requested to submit a dental program to be included under Title XIX in North Carolina. Subsequently, the committee recommended that a comprehensive dental care program be implemented under Title XIX on an incremental basis,

with priority on children's dental care.

The committee advised the State agencies that the Society planned to establish a dental service corporation in the State and strongly recommended that it be designated as the fiscal intermediary for all publicly funded programs, including Title XIX programs.

#### Resolutions

12. Resolved, that the Legislative Committee be authorized to seek amendments to the General Statutes to permit reimbursement to dentists for services rendered under any State administered health program on a usual and customary fee basis.

### STATE INSTITUTIONS COMMITTEE

JAMES M. ZEALY, Chairman (1972)

ROBERT J. HARNED (1970) THOMAS A. SMITH (1969)

K. L. Johnson (1968) WILLIAM D. YELTON (1971)

Meetings: The committee held no formal meetings. Liaison was accomplished through the mail. At Caswell Training School, in Kinston, North Carolina, October 19, 1967, Mr. Cunningham and the chairman met with Dr. Leland E. Weyer, Program Coordinator, Council on Hospi-

tal Dental Service, American Dental Association, and the various heads of dental departments of the eight mental hospitals in North Carolina. The purpose of this meeting was to encourage these institutions to attain Council approval of their dental departments, and to obtain the co-operation of this committee in a long overdue revaluation survey of previously Council-approved dental departments in 13 North Carolina hospitals.

Activities: Site visits to the dental departments of the following hospitals were conducted by committee members and other qualified dentists for purposes of revaluation: U. S. Naval Hospital, Camp Lejeune; Charlotte Memorial Hospital; Duke University Medical Center; VA Hospital, Durham; VA Hospital, Fayetteville; Womack Army Hospital, Fort Bragg; USAF Hospital, Seymour Johnson AFB, Goldsboro; Broughton Hospital, Morganton; VA Hospital, Oteen; Rex Hospital, Raleigh; VA Hospital, Salisbury; Forsyth Memorial Hospital, Winston-Salem; North Carolina Baptist Hospital, Winston-Salem;

Two institutions whose dental departments have not previously been approved, have applied for evaluation and examiners have been assigned to make site visits for evaluation purposes. They are: Dorothea Dix Hospital, Raleigh, and the 464th Tactical Hospital at Pope AFB. The latter is classified as a patient care unit other than a hospital.

Results of Survey: There are 164 hospitals in North Carolina listed by the American Hospital Association. Of these, 59 have dental departments. Of the 59, 13 had previously been Council-approved leaving 46 with dental departments unapproved by the Council. For a hospital to have the highest rating, it must have a dental department that is approved by the Council on Hospital Dental Service of the American Dental Association.

It is felt by the committee that the certification of dental departments would be a substantial step toward upgrading the level of hospital dental service. Dental needs of the State supported institutions can

possibly be brought into sharper focus, also.

### Resolutions

This report is informational in nature and no resolutions are presented.

### STATE PLANNING COMMITTEE FOR DENTISTRY

Progress Report—May 1, 1967 through April 30, 1968 Submitted for Information—No Recommendations

E. A. PEARSON, JR., Chairman

EDWARD U. AUSTIN BENNIE D. BARKER JAMES W. BAWDEN Amos S. Bumgardner A. M. Cunningham WALTER H. FINCH, JR. J. Homer Guion

Donald L. Henson JOHN T. HUGHES Joseph M. Johnson GEORGE F. KIRKLAND, JR. ROY L. LINDAHL J. A. Menius COLIN P. OSBORNE, JR.

FREEMAN C. SLAUGHTER

The committee held meetings on June 10-11, 1967; July 19, 1967; December 13, 1967; March 7, 1968 and April 21, 1968.

As was stated in the report to the House of Delegates in May, 1967, the objectives for the Planning Committee are:

1. To identify dental needs of the people in North Carolina;
2. To identify needs of the profession of dentistry in North Carolina;
3. To identify dental resources in North Carolina;

4. To develop methods which would provide more dental care for more people in North Carolina.

Early in 1967 our committee was divided into subcommittees for the

purpose of collecting information on the various dental disease categories and to write their findings in a report for the committee. Reports have been made on the following categories: Dental Caries, Periodontal Disease, Malocclusion, Oral Cancer, Traumatic Injuries, and special groups

Each of these reports was discussed by the full committee for clarity and readability. The chairman is now in the process of preparing these edited reports for publication in the near future. Thus, the first objective, as set forth by the committee on its initial organization, has been reached. The committee is currently working with the second and third objectives. Preliminary reports have been made to the committee on dental manpower, and to some extent, the needs of the profession of dentistry in North Carolina. These preliminary reports indicate a need for further and more detailed studies on dental manpower, distribution, practice, and the number of patients treated per dentist per year per location. In addition to these, the committee hopes to develop a study during the coming year which will provide information on these variables and other variables which will better describe the dental resources and needs of the profession.

The committee has been fortunate in having had the services of Dr. william J. Jasper in coordinating, editing and preparing the various reports for publication. Dr. Jasper has worked with this committee during the past year because of his special interest in dental public health while serving in a Residency Program with the Division of Dental Health, North Carolina State Board of Health.

### TELEVISION COMMITTEE

W. D. STRICKLAND, Chairman

BENJAMIN R. BAKER ROGER E. BARTON

ROY L. EARP W. ROBERT WENTZ

L. P. MEGGINSON, JR.

Meetings: The committee held meetings on September 12, 1967 and October 29, 1967 in Raleigh; November 9, 1967 in Chapel Hill; and November 14, 1967 and December 7, 1967 in Raleigh.

Purpose of Committee: This special committee appointed by the president was directed to produce in co-operation with the North Carolina Association of Professions and WUNC-TV a 30 minute TV program on dentistry and its allied professions. This program was one of six produced by the member professions of the NCAP. Each program was designed to interest high school students in that particular profession or in related professions. The program was shown over North Carolina University Educational TV protection Morely 7, 1069, p. 6, 20, p. m. University Educational TV network on March 7, 1968 at 6:30 p.m.

#### Resolutions

This report is informational in nature and no resolutions are presented.

### Resolutions

SUBMITTED TO THE 1968 HOUSE OF DELEGATES

### **Executive Committee**

### HONORARY MEMBERSHIP

At its meeting on January 6, 1968 the Executive Committee voted to recommend to the House of Delegates that Dr. Hubert A. McGuirl of Providence, Rhode Island, president-elect, American Dental Association be made an honorary member of this Society. The following resolution is submitted:

16. Resolved, that in accordance with the *Bylaws*, Chapter IV, Section 2, Dr. Hubert A. McGuirl of Providence, Rhode Island, president-elect, American Dental Association, be elected to honorary membership in the North Carolina Dental Society.

### **Executive Committee**

### COMMUNAL FLUORIDATION

Background Statement: Dental caries is the most prevalent disease among children and adults in North Carolina. Much effort has been spent in the prevention and control of the disease. The problem is becoming more critical with the increase in population and the dental manpower shortage. Fluoridation of community water supplies is soundly established as the method of choice for the prevention of dental caries. It is safe, effective, and economical. A sixty-five percent reduction in dental caries occurs in communities that have the recommended level of fluorides. Unfortunately, some North Carolina towns have been reluctant to accept this proven public health measure.

With this in mind the Executive Committee on May 5, 1968 voted to recommend that the House of Delegates adopt the following resolution:

17. Resolved, that the North Carolina Dental Society support the adjustment of the fluoride ion in all public drinking water supplies which do not presently contain the optimum amount of fluoride, and further support any measures that are appropriate, acceptable, and feasible in delivering a sound preventive dental health program to the citizens of North Carolina.

### Secretary-Treasurer C. W. Poindexter

### USE OF SCRAP AMALGAM FUNDS BY AUXILIARY

**Resolved,** that the North Carolina Dental Society direct that all funds collected for the year 1967-68 by the North Carolina Dental Auxiliary in connection with the Scrap Amalgam Drive be placed in the North Carolina Dental Society Relief Fund.

### Frank G. Atwater, Chairman, Executive Committee

### ESTABLISHMENT OF NORTH CAROLINA DENTAL AUXILIARY FUND

Resolved, that the North Carolina Dental Society authorize the North Carolina Dental Auxiliary to establish the North Carolina Dental Auxiliary Fund and to solicit the dentists of the State in future years for contributions of funds and amalgam to be placed in this Fund.

### Reference Committee A

### COMMENDING THE CONTINUING EDUCATION COMMITTEE

Resolved, that the Continuing Education Committee be commended for its initial efforts in behalf of continuing education, and be it further Resolved, that we strongly urge that every member of the North Carolina Dental Society promptly complete and return the Research Triangle Questionnaire Survey.

### Reference Committee B

### GROUP OFFICE OVERHEAD BUSINESS INSURANCE

**Resolved**, that the North Carolina Dental Society adopt the office overhead insurance program with Mutual of Omaha Insurance Company, as approved by the Insurance Committee.

#### Reference Committee B

### GUIDELINES FOR GROUP INSURANCE PROGRAMS

**Resolved**, that the North Carolina Dental Society adopt the *Guidelines* for *Group Programs* as approved by the Insurance Committee.

## Report of Delegation To A.D.A.

PAUL E. JONES (1969), Chairman RALPH D. COFFEY (1968) GEORGE F. KIRKLAND, JR. (1968) ROY L. LINDAHL (1969) Erbie M. Medlin (1970) C. C. Poindexter (1968)

Section 3 of Article V of the Constitution requires that the delegates to the American Dental Association elect a chairman and vice chairman at least 60 days prior to the convening of the House of Delegates of the American Dental Association, and that the chairman submit a report to the Society at its next annual meeting.

Officers Elected: In compliance with the Constitution the delegates met on May 14, 1967 following adjournment of the 111th Annual Session and elected the following officers: Paul E. Jones, chairman; Roy L. Lindahl, vice chairman; and Ralph D. Coffey, secretary.

Representation in Washington, D. C.: Attending the 108th Annual Session of the American Dental Association in Washington, D. C., October 29-November 2, 1967 as official representatives of the North Carolina Dental Society were the following:

Delegates: Drs. Ralph D. Coffey, Paul E. Jones, George F. Kirkland, Jr., Roy L. Lindahl, Erbie M. Medlin, and C. C. Poindexter.

Alternates: Drs. A. Breece Breland, J. Homer Guion, James H. Lee, C. P. Osborne, Jr., and C. W. Poindexter.

Mr. Andrew M. Cunningham, Executive Secretary, was also in attendance.

North Carolina Caucus: The North Carolina delegation met in caucus Sunday, October 29, at 8:00 a.m. in the headquarters suite of North Carolina in the Statler Hilton Hotel with all the delegates, the Exceptive Secretary, and the following alternates present: Drs. Lee, Oscharter of Parish Leaf borne, and Poindexter.

Fifth District Caucuses: Two caucuses of the Fifth Trustee District were held.

At the caucus on Monday, October 30, all delegates, the Executive Secretary, and the following alternates were present: Drs. Breland, Guion, Lee, Osborne, and Poindexter. In addition, Drs. Wade H. Breeland and C. C. Diercks of the State Board of Dental Examiners, and Dr. James W. Bawden, Dean of the UNC School of Dentistry attended the caucus.

At the caucus on Wednesday, November 1, all delegates, the Executive Secretary, and the following alternates were present: Drs. Breland, Lee, Osborne, and Poindexter. In addition the following attended the caucus: Dr. Clyde E. Minges, past president of the American Dental Association; Dr. S. H. Isenhower; and Drs. Breeland and Bawden.

Senator Sam J. Ervin, Jr. from North Carolina was a special guest of the delegation and spoke briefly at the caucus. Dr. Lee reported on the nearing of the Reference Committee on Legislation and Judicial Pro-

Reference Committees: Hearings on Reference Committees were held all day Tuesday, October 31. The following delegates and alternates were assigned to attend the hearings indicated by the Chairman of the Fifth District Organization: Dr. Jones, President's Address and Administrative Matters; Drs. Coffey and Lindahl, Public Health; Dr. Medlin, Dental Education and Hospitals; Dr. Osborne, Dental Trade and Laboratory Reations; Dr. Breland, Public Health; Dr. Guion, Miscellaneous Business; and Dr. Lee Legislation and Judicial Procedures and Dr. Lee, Legislation and Judicial Procedures.

House of Delegates: All six delegates attended the three sessions of the House of Delegates on Monday, October 30; Wednesday, November 1; and Thursday, November 2. Seated with the delegates at all three sessions were Secretary-Treasurer C. W. Poindexter and Executive Secretary A. M. Cunningham.

District Resolutions: Four Districts adopted resolutions urging delegates to oppose three issues to be considered by the ADA House of Delegates. The delegates are appreciative of these expressions of opinion by Society members. In a democratic system, delegates to the governing hody should not be instructed, but they should be properly informed and sensitive to the opinion and feelings of those whom they represent.

Members can be assured that the resolutions adopted by these four delegated the issues referred to in the resolutions, and were considered are included as the issues referred to in the resolutions, and were considered seriously as the issues were voted upon.

The First, Third, and Fourth Districts transmitted to the delegates resolutions opposing resolution 4 on dental and dental hygiene licensure

Las amended by the Board of Trustees.

resolutions opposing resolution 22 on the scope of duties of dental auxiliaries.

The First District transmitted to the delegates a resolution opposing resolution 110 increasing the annual ADA dues from \$40 to \$60.

Both resolutions 4 and 22 were heatedly discussed in a jam-packed

hearing room and thoroughly debated on the floor of the House.

Resolution 4, as amended by the Reference Committee, called for the approval of a Statement on Dental and Dental Hygiene Licensure which the development of approval of a Statement on Dental and Dental Hygiene Licensure which asked state licensing boards: (1) To consider the development of means other than examination for licensure; (2) To recognize the certificate of the National Board of Dental Examiners where written examinations are required; (3) To consider methods other than clinical examination for determining clinical qualifications of the individual candidate; and (4) To develop mechanisms, in consultation with constituent societies, which would insure the continued competence of all dentists. societies, which would insure the continued competence of all dentists licensed in their jurisdiction.

By vote of 204 to 194 the Statement on Dental and Dental Hygiene Licensure as amended was recommitted to the Council on Dental Education for further study and report to the 1968 House of Delegates.

A substitute for the resolution on the scope of duties of dental auxiliestitute was defeated by a vote of 219 to 170. The adopted resolution reads as follows:

Resolved, that constituent dental societies and state dental examining boards consider recommending revision of dental practice acts (1) to give their examining boards authority to prescribe rules or regulations to achieve more effective utilization of the services of dental hygienists and dental assistants and (2) to eliminate from their acts the serial listings of functions performed by the dental hygienists, and be it further

Resolved, that the state dental examining boards consider educational standards established by the American Dental Association in determining the qualifications of dental hygienists and dental assistants to perform

functions prescribed within rules or regulations of the board.

Resolution 110 proposing an increase in dues was introduced by the Board of Trustees and will be acted upon, as required by the ADA Bulaws, at the 1968 House session.

N. C. Resolution: The 1967 House of Delegates of the North Carolina Dental Society adopted the following resolution for consideration by the ADA House of Delegates:

Resolved, that the Council on Dental Therapeutics request manufacturers to properly date and label all dental materials which have a shelf life.

In its report to the House of Delegates, the Board of Trustees made

the following comment on the resolution:

"The Board of Trustees is advised that some drugs which have a limited shelf life are already required by regulation to carry an expiration date. All drugs are now required to bear a lot number from which

it is possible to determine the date of manufacture.

"In its evaluation of drugs and therapeutic products used by dentists, the Council on Dental Therapeutics reviews the problems of stability and as a provision of acceptance may require that the product container bear the date of manufacture or an expiration date; or the Council may review the method of distribution to insure that fresh products reach the consumer. The specification and certification program for dental materials, as administered by the Council on Dental Materials and Devices also includes a provision for dating materials that may deteriorate on standing.

"It is apparent, therefore, that a mechanism already exists for accomplishing the intended purpose of the North Carolina resolution. The Board of Trustees recommends that Resolution 18 be postponed in-

definitely."

The House apparently agreed with the Board of Trustees and postponed the resolution indefinitely.

Other Actions of the House: In other actions the House: adopted a record \$7 million budget with an \$81,285 deficit; expressed concern over apparent threats to the continued operation of some existing dental schools; approved a statement opposing in principle closed panels; amended the Bylaws making the Judicial Council the final review agency in all disciplinary procedures; and adopted two amendments to the ADA Dental Health Program for Children, but rejected a third.

The full text of all actions of the House of Delegates is on file at the Central Office. A summary of principal actions has been prepared

by the Executive Secretary and copies are available from the Central

Office.

In summary, the House of Delegates considered 55 resolutions and adopted 38. Of the remaining 17, the House rejected 8, postponed 4 indefinitely and recommitted 1. Three were withdrawn and 1 will be acted upon at the 1968 session.

### Resolutions

This report is informational in nature and no resolutions are presented.

### House Minutes

SUNDAY, MAY 5, 1968 TUESDAY, MAY 7, 1968 WEDNESDAY, MAY 8, 1968

### **SUNDAY, MAY 5, 1968**

Call to Order: The first meeting of the 112th annual session of the House of Delegates of the North Carolina Dental Society was called to order at 2:30 p.m., Sunday, May 5, 1968, in The Carolina, Pinehurst, N. C., by the Speaker of the House, Dr. Ralph D. Coffey.

**Invocation:** The invocation was offered by Dr. James E. Furr, Wilmington.

**Declaration of a Quorum:** Dr. C. W. Poindexter, secretary-treasurer, called the roll and declared a quorum present. It was later announced that 36 out of 38 delegates were present for the meeting.

Sergeants-at-Arms: The Speaker announced that Dr. David H. Freshwater, of Morehead City, would serve as Sergeant-at-Arms, and that he would be assisted by: Drs. Keith L. Bentley, North Wilkesboro; Thomas C. Boykin, Goldsboro; Matthew G. Delbridge, Goldsboro; R. Hogan Gaskins, Jacksonville; Frederick H. Howdy, Washington; William E. Kidd, Washington; Thomas A. Morris, Asheville; James A. Privette, Kinston; Phil S. Sanders, Kinston; Bert B. Warren, Farmville; and Walter A. White, Morehead City.

### REPORT OF RULES AND ORDER COMMITTEE

The report of the Committee on Rules and Order was presented by Dr. Penn Marshall, Jr., Fourth District, chairman. The other members of the Committee were: Drs. James H. Edwards, Walter H. Finch, Jr., and Harold E. Maxwell, all of the Fourth District.

Adoption of Official Agenda: On motion by Dr. Marshall, seconded by Maurice B. Richardson, Third District, a resolution presented by the Committee was adopted approving the official order of business for the current session as published in *Reports*, pages iii and iv.

Referral of Reports and Resolutions: On motion by Dr. Marshall, seconded by Dr. Richardson, a resolution presented by the Committee was adopted approving the list of referrals submitted by the Speaker of the House as published in *Reports*, pages viii and ix.

Approval of Report of Committee on Rules and Order: On motion by Dr. Marshall, seconded by Dr. Richardson, a resolution presented by the Committee was adopted approving the report of the Committee on Rules and Order as published in Reports, pages 46-48.

### ELECTION OF HONORARY MEMBER

Honorary Membership: On motion by the chairman of the Executive Committee, Dr. Frank G. Atwater, and seconded by Dr. Joseph M. Johnson, Ethics Committee, the following resolution was adopted:

1-1968-H. Resolved, that in accordance with the *Bylaws*, Chapter IV, Section 2, Dr. Hubert A. McGuirl of Providence, Rhode Island, president-elect, American Dental Association, be elected to honorary membership in the North Carolina Dental Society.

### COMMENTS BY PRESIDENT

The Speaker introduced President George F. Kirkland, Jr., who briefly addressed the members of the House of Delegates.

### CHANGES IN REFERRALS

The Speaker called the attention of the members of the House of Delegates to the following changes and additions to the list of referrals published in Reports:

Report of the Dental Care Programs Committee (p. 30), referred to

Reference Committee B.

Resolution 3 (p. 30), referred to Reference Committee B.

Supplemental Report Number 1 of the Dental Service Corporation Committee (p. 83), referred to Committee B.

Resolution 18 (p. 83), referred to Committee C.

Report of State Planning Committee for Dentistry (p. 82), referred to Committee C.

Resolution 17 (p. 80), referred to Committee C.

### REPORT OF FIFTH DISTRICT TRUSTEE

The Speaker introduced Dr. Arthur W. Kellner, of Hollywood, Florida, Trustee of the Fifth District, American Dental Association. Dr. Kellner reported on Association affairs.

### INTRODUCTION OF DISTINGUISHED GUESTS

President Kirkland introduced Dr. Hubert A. McGuirl, president-elect, American Dental Association. Dr. McGuirl spoke briefly to the members of the House of Delegates and brought them greetings from the American Dental Association.

President Kirkland also recognized the following distinguished guests: Dr. Howard B. Higgins of Spartanburg, South Carolina, a former Trustee of the Fifth District.

Dr. Clyde E. Minges of Rocky Mount, a past president of the North Carolina Dental Society and the American Dental Association.

Dr. C. C. Poindexter of Greensboro, a past president of the North Carolina Dental Society, and a former member of the North Carolina State Board of Dental Examiners.

Dr. Frank O. Alford of Charlotte, a past president of the North Carolina Dental Society, and a former member of the North Carolina State Board of Dental Examiners.

Dr. James W. Bawden, dean, University of North Carolina School of Dentistry.

Dr. E. A. Pearson, Jr., director, Division of Dental Health, North Carolina State Board of Health.

### REPORT OF NORTH CAROLINA DELEGATION TO A.D.A.

On motion by Dr. Maurice B. Richardson, Third District, and seconded by Dr. W. Stewart Peery, Second District, the Report of the North Carolina Delegation to the American Dental Association (*Reports*, pages 56-58), was received for information.

### AMENDMENTS TO CONSTITUTION AND BYLAWS PROPOSED

The Speaker announced that the report of the Constitution and Bylaws Committee (*Reports*, pages 23-24), Resolution 1 (page 24), and Resolution 2 (page 28), would be considered at the next meeting of the House. He stated that such announcement was in compliance of Article XIII of the *Bylaws* which requires that advance notice of all proposed amendments shall be given at a previous meeting of the same session of the House of Delegates.

### ADJOURNMENT IN MEMORY OF DR. Z. L. EDWARDS

On motion by Dr. James H. Lee, Fifth District, seconded by Dr. Darden J. Eure. Ethics Committee, the following resolution was adopted:

Whereas, it has been the will of almighty God to remove from amongst us Dr. Zeno L. Edwards, Sr., who has been a most valuable member, ever active in the affairs of our Society for forty-five years, one who throughout the years has served our Society loyally, generously, unselfishly and with wisdom, therefore be it

Resolved, that this House of Delegates at its first meeting do hereby record this expression of sincere and enduring grief, which has been sustained by a Society of which he was a faithful and most prominent member, and be it further

Resolved, that this first meeting of the House of Delegates adjourn in memory of Dr. Edwards.

Whereupon the meeting adjourned at 3:15 p.m.

### **TUESDAY, MAY 7, 1968**

Call to Order: The second meeting of the House of Delegates was called to order at 9:00 a.m. by the Speaker of the House.

**Invocation:** The invocation was offered by Dr. Luther H. Butler, Greensboro.

**Declaration of a Quorum:** Dr. C. W. Poindexter, secretary-treasurer, called the roll and declared a quorum present. It was later announced that 37 out of 38 delegates were present for the meeting.

### REPORT OF CONSTITUTION AND BYLAWS COMMITTEE

The report of the Constitution and Bylaws Committee was presented by Dr. Thomas G. Nisbet, Charlotte, chairman. The other members of the Committee were: Drs. G. Shuford Abernethy, Hickory; D. T. Carr, Durham; C. P. Godwin, Rocky Mount; and J. Henry Ligon, Jr., Raleigh.

Amendments to Bylaws: Dr. Nisbet stated that it was the concensus of the Committee that the composition of sub-committees should be clearly defined to avoid misunderstanding in the future and presented the following resolution: 2-1968-H. Resolved, that Resolution 1 (Constitution and Bylaws Committee) be amended by deleting Section 3 and substituting therefor:

Section 3. A standing committee may appoint sub-committees which shall be directly responsible to the standing committee and which shall have no power except that delegated to them by the standing committee. Such sub-committees shall report only to the standing committee which created them. The membership of the sub-committees is not necessarily restricted to the membership of a standing committee.

On motion by Dr. Penn Marshall, Jr., Fourth District, seconded by Dr. L. P. Megginson, Jr., Third District, Resolution 2-1968-H was adopted. Dr. Nisbet stated that dental prepayment programs were on the increase and would continue to increase in the future. Therefore, the Committee felt that the Dental Care Programs Committee should include sufficient members to take care of the anticipated work-load. Therefore, the Committee recommended the adoption of the following resolution:

3-1968-H. Resolved, that Resolution 1 (Constitution and Bylaws Committee) be amended by deleting Section 7 and substituting therefor:

Section 7. Dental Care Programs Committee. This Committee shall consist of 15 members, 3 from each district society, 3 members appointed by the president for terms of 5 years, 4 years, 3 years, 2 years, and 1 year respectively, and thereafter 3 members shall be appointed annually for terms of 5 years. The duties of this Committee shall be:

a. To formulate and recommend policies relative to the planning, administration, and financing of dental care programs.

b. To study, evaluate, and disseminate information on the planning, administration, and financing of dental care programs.

c. This committee or a sub-committee of this committee shall serve as a review committee for dental care programs.

On motion by Dr. W. Stewart Peery, Second District, seconded by Dr. M. Lamar Dorton, Second District, resolution 3-1968-H was adopted. Dr. Nisbet stated that the Committee was concerned that continuity of membership on the Insurance Committee was not provided for in the proposed amendments to the *Bylaws*. Therefore, the Committee recommended the adoption of the following resolution:

4-1968-H. Resolved, that Resolution 1 (Constitution and Bylaws Committee) be amended by deleting Section 15 and substituting therefor:

Section 15. Insurance Committee. This committee shall consist of five members appointed by the president for terms of 5 years, 4 years, 3 years, 2 years, and 1 year respectively, and thereafter one member shall be appointed annually for a term of 5 years. The duties of this Committee shall be:

a. To study and recommend to the House of Delegates programs of group insurance for the protection of members of this Society.

b. To supervise group insurance programs presently in force.

c. To negotiate with brokers, agents, and insurance companies to obtain greater coverage, improved service or more attractive premium rates for group insurance programs available to the membership.

On motion by Dr. Maurice B. Richardson, Third District, seconded by Dr. M. Stevenson Thurston, Second District, Resolution 4-1968-H was adopted.

On motion by Dr. W. Stewart Peery, Second District, seconded by Dr. Francis A. Buchanan, First District, the following resolution was adopted:

5-1968-H. Resolved, that Resolution 1 (Constitution and Bylaws

Committee) as amended, be adopted.

Dr. Nisbet stated that the Committee felt that listing of standing committees in the Constitution was not necessary and therefore recommended

the adoption of Resolution 2 (Constitution and Bylaws Committee).
On motion by Dr. Richard F. Hunt, Jr., Fifth District, seconded by Dr. Thomas B. Reid, Jr., Fifth District, the following resolution was adopted:

6-1968-H. Resolved, that Article VII, Standing Committees, of the Constitution be deleted.

### COMMENTS BY PRESIDENT-ELECT

Dr. Colin P. Osborne, Jr., president-elect, announced that Dr. James H. Lee, vice president, had been elected chairman of the Advisory Committee on the Education of Dental Auxiliary Personnel. This committee, he explained, assists the Department of Community Colleges in the development of training programs.

Dr. Osborne introduced Miss Miriam Daughtry and Mrs. Louise Brown

of the Department of Community Colleges.

### REPORT OF THE COMMITTEE ON THE PRESIDENT'S ADDRESS

The report of the Committee on the President's Address was read by Dr. Frank G. Atwater, chairman. The other members of the Committee were: Drs. Walter H. Finch, Jr., and C. B. Taylor. The Committee made the following statement:

The Committee wishes to commend President Kirkland on a wellprepared and thought-provoking paper. He does not minimize the credit due his various committees as he points out the splendid work

they accomplished during the past year.

President Kirkland shows foresight, vision, and wisdom in his realistic report regarding the increasing demands facing dentistry today. He stood firm in backing his recommendation that we accept with an open mind this socialistic reform as it begins to alter our present day concept of the practice of dentistry yet we heed his warning to prepare ourselves to be able to render the best service possible to mankind during these changing times.

On motion by Dr. Atwater, seconded by Dr. Cecil A. Pless, Jr., First District, the President's Address was received for information.

### REPORT OF REFERENCE COMMITTEE B

The report of Reference Committee B was read by Dr. M. Lamar Dorton, Second District, chairman. The other members of the Committee were: Drs. Maurice B. Richardson, Third District; Cecil A. Pless, Jr., First District; M. W. Carpenter, First District; and P. C. Purvis, Fourth District.

Report of Dental Practice Act Committee: The Committee reported that it had considered the report of the Dental Practice Act Committee and recommended the adoption of Resolutions 10 and 11.

On motion by Dr. Dorton, seconded by Dr. J. Homer Guion, Executive

Committee, the following resolution was adopted:

7-1968-H. Resolved, that the study of dental laws in North Carolina be continued by the committee and sub-committees as now constituted. On motion by Dr. Dorton, seconded by Dr. Bennie D. Barker, Third District, the following resolution was adopted:

8-1968-H. Resolved, that the State Board of Dental Examiners be requested to consider amending its rules and regulations pertaining to dental assistants to include the recommendations in the report of the Sub-Committee on Dental Assisting.

Report of Dental Service Corporation Committee: The Committee stated that it had reviewed the report of the Dental Service Corporation Committee and recommended that it be received for information.

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On motion by Dr. Dorton, seconded by Dr. L. P. Megginson, Jr., Third District, the report of the Dental Service Corporation Committee was

received for information.

The Committee reported that it had considered Resolution 18 submitted by the Dental Service Corporation Committee and noted that it called for the creation of a "review committee as a standing committee, or assign review committee responsibilities to another appropriate standing committee, to serve all dental plans."

The Committee called the attention of the House to Resolution 5-1968-H which provided for a Dental Care Programs Committee to serve as a review committee for dental care programs, and accomplished the purpose of Resolution 18. Therefore, the Committee recommended the

rejection of Resolution 18.

On motion by Dr. Dorton, seconded by Dr. James H. Lee, vice president,

Resolution 18 was rejected.

Report of Industrial Commission Committee: The Committee reported that it had reviewed the report of the Industrial Commission Committee and recommended that it be received for information.

On motion by Dr. Dorton, seconded by Dr. W. Stewart Peery, Second District, the report of the Industrial Commission Committee was received for information

for information.

**Report of Insurance Committee:** The Committee stated that it had reviewed the report of the Insurance Committee, and recommended that it be received for information.

On motion by Dr. Dorton, seconded by Dr. Cecil A. Pless, Jr., First District, the report of the Insurance Committee was received for informa-

tion.

Office Overhead Insurance: Dr. Dorton stated that the Committee received a report submitted to the Executive Committee by the Insurance Committee. The Committee noted that the Insurance Committee had recommended that a proposal for a group office overhead expense insurance from Mutual of Omaha be approved. Therefore, the Committee recommended the adoption of the following resolution:

9-1968-H. Resolved, that the North Carolina Dental Society adopt the office overhead insurance program with Mutual of Omaha as approved by the Insurance Committee.

The Speaker requested Dr. J. S. D. Nelson, chairman, Insurance Committee, to make a brief statement explaining the Mutual of Omaha

proposal.

Dr. Nelson stated, "Mutual of Omaha insurance is an office overhead coverage, the premiums of which are tax deductible under the Internal Revenue Service. Only the benefits from that are not tax deductible. The need for this coverage was expressed by something over a hundred members in answer to an inquiry in the *Newsletter*.

"We considered several other plans, and we felt that this one was the

most suitable and applicable to the membership.'

On motion by Dr. Dorton, seconded by Dr. Maurice B. Richardson, Third District, Resolution 9-1968-H was adopted.

Guidelines for Group Programs: In its report to the Executive Committee, the Insurance Committee recommended the approval of *Guidelines for Group Programs*. The text follows:

### **Guidelines for Group Programs**

Group insurance and retirement programs sponsored by the Society are a privilege and benefit of membership in the Society and participation in them will be limited to Society members. Administrators of Society-sponsored group programs are requested to carefully observe and

comply with these guidelines:

(1) The Central Office of the North Carolina Dental Society shall submit annually to administrators of Society-sponsored group insurance and retirement programs a roster of members in good standing, and shall notify them of any changes in the status of members as they occur.

(2) No individual will be enrolled in a Society-sponsored insurance or retirement program unless his name appears on the official roster of the Society as a member in good standing or on subsequent amendments to that roster except as noted in paragraph 3.

(3) If an applicant is not a member in good standing, but has applied for membership, his name will be submitted to the Central Office for

(4) If the Central Office determines that a non-member applicant for enrollment in a Society-sponsored insurance or retirement program has filed a complete application for membership with the proper District, the Central Office will approve the applicant for enrollment in a Societysponsored program subject to election to membership at the next annual District meeting, provided that no non-member applicant will be approved for participation unless he is applying for membership for the first time, or he is a former member who resigned to fulfill his military obligation or enter full-time graduate study.

(5) Administrators will submit annually to the Central Office a list of those currently enrolled in Society-sponsored group programs and will notify the Central Office of any changes or additional enrollments as they

Therefore, the Committee recommended the adoption of the following resolution:

10-1968-H. Resolved, that the North Carolina Dental Society adopt the Guidelines for Group Programs as approved by the Insurance Committee.

On motion by Dr. Dorton, seconded by Dr. C. W. Poindexter, secretarytreasurer, Resolution 10-1968-H was adopted.

Report of Insurance Industry Liaison Committee: The Committee stated it has reviewed the report of the Insurance Industry Liaison Committee and recommended that it be received for information.

On motion by Dr. Dorton, seconded by Dr. Francis A. Buchanan, First District, the report of the Insurance Industry Liaison Committee was received for information.

Report of Dental Care Programs Committee: The Committee stated that it had considered Resolution 3 presented by the Dental Care Programs Committee and noted that it called for the establishment of a review committee for dental care programs. The Committee called the attention of the House to Resolution 5-1968-H which provided for a review committee and recommended that Resolution 3 be postponed indefinitely.

On motion by Dr. Dorton, seconded by Dr. W. Smith Kirk, Second

District, Resolution 3 was postponed indefinitely.

### REPORT OF REFERENCE COMMITTEE A

The report of Reference Committee A was read by Dr. Francis A. Buchanan, First District, chairman. The other members of the Committee were: Drs. W. Stewart Peery, Second District; Richard F. Hunt, Jr., Fifth District; James B. Howell, Third District; and C. Ray Holmes, Third District.

Report of Annual Session Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Annual Session Committee and recommended that it be received for information.

On motion by Dr. Buchanan, seconded by Dr. William A. Mynatt, First

District, the report of the Annual Session Committee was received for information.

Report of Cancer Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Cancer Committee and recommended that it be received for information.

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On motion by Dr. Buchanan, seconded by Dr. Richard F. Hunt, Jr., Fifth District, the report of the Cancer Committee was received for information.

Report of Continuing Education Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Continuing Education Committee, and presented the following resolution:

11-1968-H. Resolved, that the Continuing Education Committee be commended for its initial efforts in behalf of continuing education, and be it further

Resolved, that we strongly urge that every member of the North Carolina Dental Society promptly complete and return the Research Triangle Questionnaire Survey.

On motion by Dr. Buchanan, seconded by Dr. W. Stewart Peery, Second District, Resolution 11-1968-H was adopted.

Report of Dental Assistants Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Dental Assistants Committee,

and recommended that it be received for information.

On motion by Dr. Buchanan, seconded by Dr. Harold E. Maxwell,
Fourth District, the report of the Dental Assistants Committee was re-

ceived for information.

Report of Dental Care for the Aged Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Dental Care for the

Aged Committee, and recommended that it be received for information. On motion by Dr. Buchanan, seconded by Dr. Cecil A. Pless, Jr., First District, the report of the Dental Care for the Aged Committee was

received for information.

Dr. Buchanan stated that the Committee had reviewed Supplemental Report 1 of the Dental Care for the Aged Committee, and recommended

that it be received for information.

On motion by Dr. Buchanan, seconded by Dr. James B. Howell, Third District, Supplemental Report 1 of the Dental Care for the Aged Committee was received for information.

Report of Dental Education Committee: Dr. Buchanan stated that the Committee had reviewed the report of the Dental Education Committee, and recommended that it be received for information.

On motion by Dr. Buchanan, seconded by Dr. P. C. Purvis, Fourth District, the report of the Dental Education Committee was received for

information.

Report of Council on Dental Health: Dr. Buchanan stated that the Committee had reviewed the report of the Council on Dental Health, and recommended that it be received for information.

On motion by Dr. Buchanan, seconded by Dr. M. Lamar Dorton, Second District, the report of the Council on Dental Health was received for

information.

Report of the Dental Hygienists Committee: Dr. Buchanan stated that the Committee had considered Resolution 4 of the Dental Hygienists Committee, and recommended that it be adopted.

Dr. Buchanan moved that the following resolution be adopted:

Resolved, that the House of Delegates of the North Carolina Dental Society recommend that dentists compensate dental hygienists on a salary basis, rather than by commission.

Dr. Horace P. Reeves, Jr., Second District, seconded the motion.

Dr. Max W. Carpenter, chairman, Dental Hygienists Committee, pointed out that the point at issue was the manner of payment, rather than the amount.

Dr. C. W. Horton, Ethics Committee, said that if the dental hygienist were reimbursed in the same way as the dental assistant, there would be less friction among the office staff, and it would eliminate the necessity of bookkeeping procedures.

Dr. C. W. Poindexter, secretary-treasurer, pointed out the possibility that some dental assistants and laboratory technicians were working in dental offices on a commission basis, and suggested that the wording in the resolution should be changed to include all auxiliary personnel.

Dr. Carpenter agreed, and suggested that it would put the reimbursement of all auxiliary personnel on a higher ethical plane. Further, he said, the resolution then would not be pointed directly at dental hygienists.

Dr. Poindexter moved that the resolution be amended by striking the word "hygienists," and inserting the word "auxiliaries." Dr. George F. Kirkland, Jr., president, seconded the motion.

Dr. Horton pointed out that many dental laboratory technicians do not work in a dental office and are paid on a fee-percentage basis. Dr. Horton moved that the amendment be amended by striking out the word "auxiliaries" and inserting the words "dental office auxiliary personnel." Dr. L. P. Megginson, Jr., Third District, seconded the motion.

On vote, the amendment to the amendment was adopted.

On motion by Dr. Buchanan, seconded by Dr. Megginson, the following amended resolution was adopted:

12-1968-H. Resolved, that the House of Delegates of the North Carolina Dental Society recommend that dentists compensate dental office auxiliary personnel on a salary basis, rather than by commission.

Dr. Buchanan stated that the Committee had considered Resolution 5 of the Dental Hygienists Committee, and recommended that it be adopted.

On motion by Dr. Buchanan, seconded by Dr. Fenton S. Cunningham, First District, the following resolution was adopted:

13-1968-H. Resolved, that no additional schools of dental hygiene be activated for the coming year in order that we may concentrate our efforts on improving those programs now underway.

### INTRODUCTION OF DISTINGUISHED GUESTS

Dr. Norman F. Ross, a past president of this Society, introduced Dr. Hume S. Powell, president of the Virginia Dental Association, and Mrs. Powell.

Dr. Powell expressed his thanks for the hospitality extended to him and Mrs. Powell. He invited the members of the Society to attend the annual session of the Virginia Dental Association which will be held in Arlington, Virginia, September 22-25, 1968.

#### REPORT OF REFERENCE COMMITTEE C

The report of Reference Committee C was read by Dr. M. W. Aldridge, Fifth District, chairman. The other members of the Committee were: Drs. T. S. Fleming, Fifth District; W. Smith Kirk, Second District; William A. Mynatt, First District; and M. S. Thurston, Second District.

**Resolution on Communal Fluoridation:** Dr. Aldridge stated that the Committee had considered Resolution 17 presented by the Executive Committee, and recommended that it be adopted.

On motion by Dr. Aldridge, seconded by Dr. T. S. Fleming, Fifth District, the following resolution was adopted:

14-1968-H. Resolved, that the North Carolina Dental Society support the adjustment of the fluoride ion in all public drinking water supplies which do not presently contain the optimum amount of fluoride, and further support any measures that are appropriate, acceptable, and feasible in delivering a sound preventive dental health program to the citizens of North Carolina.

Report of State Planning Committee for Dentistry: Dr. Aldridge stated that the Committee had reviewed the report of the State Planning Committee for Dentistry, and recommended that it be received for information.

On motion by Dr. Aldridge, seconded by Dr. Richard F. Hunt, Jr., Fifth District, the report of the State Planning Committee for Dentistry was received for information.

Report of Relief Committee: Dr. Aldridge stated that the Committee had reviewed the report of the Relief Committee, and noted with concern that only one application for a relief grant had been approved during the past year. The Committee felt that there were members in need who were not being called to the attention of the Relief Committee, and urged members to report individuals who were deserving of financial assistance to their District Relief Committee.

The Committee also expressed concern over the unusual delay in processing an application for a grant, and the conservative amount awarded. The Committee urged that steps be taken to speed up the processing of applications for relief grants, and consideration be given to increasing the amounts of the grants in the face of increasing cost of living.

The Committee recommended that the report of the Relief Committee be received for information.

On motion by Dr. Aldridge, seconded by Dr. Horace P. Reeves, Jr., Second District, the report of the Relief Committee was received for information.

Dr. C. W. Horton, Ethics Committee, requested that the Executive Secretary, Mr. Andrew M. Cunningham, outline the requisites for qualifying for a relief grant. Mr. Cunningham stated that each application for a grant was considered on its own merits, based on the assets and liabilities of the applicant. He said there was no maximum grant and that the amount awarded by the Society's Relief Committee is matched by the ADA Council on Relief.

Dr. L. P. Megginson, Jr., Third District, asked if widows of dentists were eligible for relief grants. Mr. Cunningham said that under the terms of the Indenture of Trust, all licensed dentists, their widows and dependents, were eligible. He emphasized that membership in the Society was not a requisite for eligibility.

Dr. Richard F. Hunt, Jr., Fifth District, asked the percentage of applications approved. Mr. Cunningham said that to his best knowledge no application for a grant had been disapproved in the last four or five years. He explained that in the event the Relief Committee refused to award a grant, it was the policy of the Committee to forward the application to the ADA Council on Relief for review.

Use of 1967-68 Scrap Amalgam Drive Funds: Dr. C. W. Poindexter, secretary-treasurer, stated that the North Carolina Dental Auxiliary since 1953 had conducted annually a Scrap Amalgam Drive for the benefit of the Relief Fund. Auxiliary members, he said, had become concerned that assets in the Relief Fund amounted to over \$40,000 and that in recent years, very little money had been paid out in grants. Consequently, the Auxiliary explored several other possibilities for the use of proceeds from the collection of scrap amalgam, and presented to the Executive Committee a proposal for the establishment of a North Carolina Dental Auxiliary Fund to be administered by the Dental Foundation of North Carolina. Inc. This would be a charitable fund which could be used for

several purposes, including loans to individuals or dental organizations, research projects, hospital dental programs, and dental education.

The Auxiliary proposed that in the future proceeds from the annual scrap amalgam collection be deposited in this fund. On May 5, 1968 the

Executive Committee approved the proposal.

Dr. Poindexter pointed out that during the past year dentists contributed scrap amalgam and cash on the premise that they were contributing to the Relief Fund, and it was his opinion that proceeds from future scrap amalgam collections could be contributed to the Dental Auxiliary Fund, but that proceeds from the 1967-68 collection should be used for relief purposes.

On motion by Dr. Poindexter, seconded by Dr. C. W. Horton, Ethics

Committee, the following resolution was adopted:

15-1968-H. Resolved, that the North Carolina Dental Society direct that all funds collected for the year 1967-68 by the North Carolina Dental Auxiliary in connection with the Scrap Amalgam Drive be placed in the North Carolina Dental Society Relief Fund.

Report of Legislative Committee: Dr. Aldridge stated that the Committee had reviewed the report of the Legislative Committee, and recommended that it be received for information.

On motion by Dr. Aldridge, seconded by Dr. Maurice B. Richardson, Third District, the report of the Legislative Committee was received for

information.

Report of Library and History Committee: Dr. Aldridge stated that the Committee had reviewed the report of the Library and History Committee, and recommended that it be received for information.

On motion by Dr. Aldridge, seconded by Dr. Harold E. Maxwell, Fourth

District, the report of the Library and History Committee was received

for information.

Report of Membership Committee: Dr. Aldridge stated that the Committee had considered Resolution 9 of the Membership Committee, and

recommended that it be adopted.

The Speaker called attention to Article VI of the Bylaws which provides that no member can be dropped from the roll when charges against him are pending. The Speaker asked Dr. Joseph M. Johnson, chairman, Ethics Committee, if any charges were pending against any of the men named in the resolution. Dr. Johnson answered in the negative.

On motion by Dr. Aldridge, seconded by Dr. Colin P. Osborne, Jr.,

president-elect, the following resolution was adopted:

16-1968-H. Resolved, that it be made a matter of record that the following did not pay 1967 dues by December 31, 1967, and have been dropped from the roll according to Article VI, Section 6, of the Bylaws:

First District—W. B. Masters, Bakersville Second District-Donald J. McGowan, Charlotte R. R. Shoaf, Lexington Third District—Jerry L. Corbin Greensboro

Report of Military and Veterans Affairs Committee: Dr. Aldridge reported that the Committee had reviewed the report of the Military and Veterans Affairs Committee, and recommended that it be received for information. The Committee noted that the basic fee schedule of the Veterans Administration will become effective in North Carolina July 1, 1968, and that all licensed dentists would be notified by the Veterans Administration prior to this date.

Mr. Andrew M. Cunningham, executive secretary, advised the members of the House that the procedure for approving dentists for participating in the dental program of the VA had been changed. He stated that it would no longer be necessary for a dentist to submit form 10-2718 which required approval by the State Society. A dentist may now apply

directly to the regional VA office in Winston-Salem indicating he desires to participate in the program and agrees to accept the fees published in the

basic fee schedule.

On motion by Dr. Aldridge, seconded by Dr. T. S. Fleming, Fifth District, the report of the Military and Veterans Affairs Committee was received for information.

Report of Prosthetic Dental Service Committee: Dr. Aldridge stated that the Committee had considered Resolution 6 of the Prosthetic Dental Service Committee, and recommended that it be adopted.

On motion by Dr. Aldridge, seconded by Dr. M. S. Thurston, Second

District, the following resolution was adopted:

17-1968-H. Resolved, that the Prosthetic Dental Service Committee be encouraged to continue its efforts to further the good relations now existing between the North Carolina Dental Society and the North Carolina Dental Laboratory Association.

Dr. Aldridge stated that the Committee had considered Resolution 7 of the Prosthetic Dental Service Committee, and recommended that it be adopted.

On motion by Dr. Aldridge, seconded by Dr. T. S. Fleming, Fifth

District, the following resolution was adopted:

18-1968-H. Resolved, that local dental society groups be encouraged to issue invitations to laboratory personnel within the area of these groups to attend clinics and seminars which would be of mutual benefit.

Dr. Aldridge stated that the Committee had considered Resolution 8 of the Prosthetic Dental Service Committee, and recommended that it be adopted.

On motion by Dr. Aldridge, seconded by Dr. M. S. Thurston, Second

District, the following resolution was adopted:

19-1968-H. Resolved, that omission of dental laboratory listing in the Yellow Pages of telephone directories be continued as in the past.

Report of School Health Committee: Dr. Aldridge stated that the Committee had considered Resolution 12 of the School Health Committee, and noted that the word "authorized" was used in the resolution, rather than the word "directed." The Committee was informed by the chairman of the School Health Committee that this wording was deliberate to permit the Legislative Committee to seek appropriate legislation, if necessary, at the most appropriate time and avoid the possibility of going to the Legislature too often. He stated that the Committee recommended that Resolution 12 be adopted.

On motion by Dr. Aldridge, seconded by Dr. T. S. Fleming, Fifth Dis-

trict, the following resolution was adopted:

20-1968-H. Resolved, that the Legislative Committee be authorized to seek amendments to the General Statutes to permit reimbursement to dentists for services rendered under any State-administered health program on a usual and customary fee basis.

Report of State Institutions Committee: Dr. Aldridge stated that the Committee had reviewed the report of the State Institutions Committee, and recommended that it be received for information.

On motion by Dr. Aldridge, seconded by Dr. M. Lamar Dorton, Second

District, the report of the State Institutions Committee was received for

information.

Report of Television Committee: Dr. Aldridge stated that the Committee had reviewed the report of the Television Committee, and recommended that it be received for information.

On motion by Dr. Aldridge, seconded by Dr. Richard F. Hunt, Jr., Fifth

District, the report of the Television Committee was received for information.

Report of Executive Secretary: Dr. Aldridge stated that the Committee had reviewed the report of the Executive Secretary, recommended that it be received for information, and wished to make the following com-

ment:

"The Reference Committee commends the executive secretary for the efficient transfer of records to the new Central Office; the above average membership of 89 per cent in North Carolina versus 82 per cent nationally; and dues collection of 98.95 per cent. The Committee also compliments him for maintaining reserve funds at a relative status quo in spite of increased operating expenses, litigation, and other major ex-

On motion by Dr. Aldridge, seconded by Dr. Penn Marshall, Jr., Fourth District, the report of the Executive Secretary was received for informa-

tion.

### RECOGNITION OF VISITORS

The Speaker recognized the following visitors in the gallery: Dr. Charles H. Teague of Greensboro, a former vice president of the Society; and the Speaker's wife, Cecile, a past president of the North Carolina Dental Auxiliary.

### REPORT OF ETHICS COMMITTEE

On motion by Dr. Richard F. Hunt, Jr., Fifth District, seconded by Dr. Harold E. Maxwell, Fourth District, the report of the Ethics Committee was received for information.

### REPORT OF SECRETARY-TREASURER

On motion by Dr. C. W. Poindexter, secretary-treasurer, seconded by Dr. James H. Lee, vice president, the report of the secretary-treasurer showing the balances of funds as of April 30, 1968 was received for information.

### NEW BUSINESS

Statement by Chairman of Dental Care for the Aged Committee: The Speaker recognized Dr. Walter H. Finch, Jr., chairman, Dental Care for the Aged Committee. Dr. Finch called attention to Supplemental Report 1 of the Committee which revealed that the Board of Welfare had recommended to the Advisory Budget Commission that about \$2 million be earmarked annually to support a comprehensive dental care program for welfare recipients as recommended by the Committee. He noted that this would expand the scope of dental care provided MAA, APTD, and OAA recipients to include all dental services listed in the State Agencies Fee Schedule adopted October 1, 1967, and would be the only dental program administered by any State agency which offered comprehensive dental care. Dr. Finch stated that the Committee expected the Advisory Budget Commission to approve the recommendation and that the program would become effective July 1, 1968.

Dr. Finch expressed the thanks of the Committee to the following officials of the Department of Welfare for their interest in and support of the proposed comprehensive dental care program: Mr. R. C. Howison, Jr., chairman of the Board; Colonel Clifton R. Craig, commissioner;

and Mr. Emmett L. Sellers, director, Medical Services.

Establishment of N. C. Dental Auxiliary Fund: Dr. Frank G. Atwater, chairman, Executive Committee, reported that the Executive Committee had approved the establishment of a North Carolina Dental Auxiliary Fund to be administered by the Dental Foundation of North Carolina, Inc. He requested Dr. Bennie D. Barker, secretary-treasurer of the Foundation, to comment on the Fund.

Dr. Barker explained that at the request of the Auxiliary, the establish-

ment of the Fund was proposed to support worthy projects in the field of dentistry. He suggested that proceeds from the Auxiliary's annual drive for scrap amalgam could properly be channeled into the Fund.

Dr. William G. Ware, Jr., Second District, suggested that the name of the Dental Relief Fund was archaic and should be changed. Mr. Andrew M. Cunningham, Executive Secretary, explained that this would not only require a change in the Bylaws, but also a change in the Indenture of Trust under which the Relief Fund was classified as a charitable fund by Internal Revenue Service for income tax purposes.

Dr. J. Homer Guion, past president, pointed out that in the future, if the Relief Fund needed money, proceeds from the collection of scrap

amalgam could still be contributed to the Relief Fund.

On motion by Dr. Atwater, seconded by Dr. Maurice B. Richardson, Third District, the following resolution was adopted:

21-1968-H. Resolved, that the North Carolina Dental Society authorize the North Carolina Dental Auxiliary to establish the North Carolina Dental Auxiliary Fund and to solicit the dentists of the State in future years for contributions of funds and amalgam to be placed in this Fund.

Resolution to Rescind Approval of Publication by National Confectioners Association: Dr. M. W. Aldridge, Fifth District, called attention to a booklet titled "How to Protect Dental Health While Enjoying Candy" published by the National Confectioners Association, and the following statement printed on the back of the booklet: "The information on dental health education contained in this booklet is considered by the American Dental Association to be in accord with current scientific knowledge (1967)."

Dr. Aldridge pointed out that according to a covering letter from Mr. Robert L. Richards, president, National Confectioners Association, the pamphlet would be widely distributed to dentists, schools, PTA groups, the press, and others. He also suggested that copies would be supplied to dentists on request for use as patient education material.

Dr. Aldridge said that statements contained in the booklet were misleading in that they implied that candy had nutritional value and evaded the fact that sweets cause acid production which admittedly is damaging. He also questioned the validity of the following statement which appears in the text of the booklet: "The United States has just about eliminated tooth decay among midshipmen in a well-balanced but high carbohydrate diet."

Dr. Aldridge read a letter he had written to Dr. Charles L. McDermott, chairman, ADA Council on Dental Health Education, in which he expressed his objection to the apparent endorsement of this pamphlet by the American Dental Association. He stated that copies of the letter were sent to: General Robert B. Shira, Office of the Surgeon General; Mr. Perry J. Sandell, director, Bureau of Dental Health Education, American Dental Association; and Mr. Peter C. Goulding, director, Bureau of Public Information, American Dental Association.

Dr. McDermott replied that he was not aware of the publication and requested that a copy be sent to him.

Mr. Goulding replied that the Bureau of Dental Health Education had received the manuscript of the booklet and concluded that it "takes a rational approach to the ingestion of candy." He stated further that the booklet had been distributed to over 100,000 dentists and to date approximately 1,500 letters had been received by his office, only nine of which had been critical. The others, he said, were in praise of the booklet and requested copies for distribution in dental offices and in Children's Dental Health Week programs.

Dr. Aldridge stated that letters of protest had also been written to appropriate ADA officials by Dr. James H. Lee, Goldsboro; and Dr. Jack Silvers, Greenville.

Dr. Walter S. Linville, Jr., Fifth District, indicated that he had forwarded a letter to the ADA in protest of the booklet.

Dr. Aldridge moved that the following resolution by the Fifth District

Dental Society be adopted:

Resolved, that the Fifth District Dental Society is opposed to the American Dental Association's Bureau of Dental Health Education's endorsement and approval of a publication entitled "How to Protect Dental Health While Enjoying Candy"; therefore let it be

Resolved, that the North Carolina Dental Society endorses and joins

the Fifth District in this resolution.

Dr. James H. Lee, Vice President, seconded the motion.

The Speaker asked Dr. Aldridge if it was his intent that the proposed resolution be directed to the American Dental Association. Dr. Aldridge answered in the affirmative. The Speaker suggested that the resolution should be amended to include a statement to this effect.

On motion by Dr. C. W. Poindexter, secretary-treasurer, seconded by Dr. Aldridge, the following substitute motion was adopted:

22-1968-H. Resolved, that the American Dental Association by appropriate action rescind the approval of the publication "How to Protect Dental Health While Enjoying Candy," published by the National Confectioners Association.

### ADJOURNMENT

The Speaker announced that the House would convene Wednesday morning at 9:00 a.m. for its final session, but that no new business could be considered at that session except by unanimous consent. He called for further new business. There being none, he entertained a motion to adjourn.

A motion to adjourn, severally proposed and seconded, was adopted. Whereupon the meeting adjourned at 11:50 a.m.

### WEDNESDAY, MAY 5, 1938

Call to Order: The third meeting of the House of Delegates was called to order at 9:00 a.m. by the Speaker of the House.

Invocation: The invocation was offered by Dr. W. Smith Kirk, Second District.

Declaration of a Quorum: Dr. C. W. Poindexter, secretary-treasurer, called the roll and declared a quorum present. It was later announced that 27 out of 38 delegates were present for the meeting.

### UNFINISHED BUSINESS

The Speaker announced that all items of unfinished business had been considered and acted upon.

### COMMENTS BY PRESIDENT

President George F. Kirkland, Jr. complimented the Executive Secretary for his efficient organization of the business of the House of Delegates which enabled the House to accomplish much in record time.

He expressed his pleasure that the House had acted favorably on expanding the functions of dental assistants and thanked Dr. W. L. Hand, Jr. and the members of the Dental Practice Act Committee for their diligence in the preparation of an excellent report.

He said he was also pleased with the decision of the House on matters pertaining to the Relief Fund.

He thanked Dr. Freeman C. Slaughter for serving so efficiently as parliamentarian, and Dr. Ralph D. Coffey for his leadership as speaker

of the house which resulted in the House accomplishing so much in record time.

He announced with regret that Dr. L. D. Herring, the newly-elected secretary-treasurer, had suffered a heart attack the previous evening and that only time would tell what the results would be.

### ANNOUNCEMENTS

Executive Secretary Andrew M. Cunningham announced that registration at 5:00 p.m. on Tuesday, May 7, totalled 2,189, and stated that this was 3 more than the final registration total for the previous year.

He announced that the Executive Committee would meet immediately

following the adjournment of the 112th Annual Session.

### COMMENTS BY SPEAKER OF THE HOUSE

Speaker Ralph D. Coffey thanked the chairmen and members of the Reference Committees and the sergeants-at-arms for their fine work. He also thanked the Central Office staff, Mr. Demont Roseman, press representative; Mr. Allan E. Drew, stenotypist; and Dr. Freeman C. Slaughter, parliamentarian, for their excellent services.

### ADJOURNMENT

Dr. Frank G. Atwater, chairman, Executive Committee, moved that the meeting be adjourned. The motion was seconded by Dr. J. Homer Guion, Executive Committee.

Whereupon, the House of Delegates adjourned sine die at 9:30 .a.m.

### Attendance

# Record

1968

Members of House of Delegates

	May 5	MEETINGS May 7	May 8
SPEAKER OF THE HOUSE			
Ralph D. Coffey	•	•	•
OFFICERS			
George F. Kirkland, Jr., President Colin P. Osborne, Jr., PresElect James H. Lee, Vice President C. W. Poindexter, SecTreas	•	•	•
EXECUTIVE COMMITTEE			
Frank G. Atwater, Chairman	•	•	•
ETHICS COMMITTEE			
Joseph M. Johnson, Chairman	•	•	•
FIRST DISTRICT			
Francis A. Buchanan Max W. Carpenter Fenton S. Cunningham William A. Mynatt Cecil A. Pless, Jr.	•		•
ALTERNATES			
John T. Adair.  Dwight B. Hord			:

	May 5	MEETINGS May 7	May 8
SECOND DISTRICT			
M. Lamar Dorton W. Smith Kirk W. Stewart Peery M. Stevenson Thurston William G. Ware, Jr	•	•	•
ALTERNATES			
J. B. Freedland Robert A. George James E. Graham, Jr Horace P. Reeves, Jr J. Harry Spillman Barry G. Miller	•		
THIRD DISTRICT			
Bennie D. Barker. C. Ray Holmes. James B. Howell. L. P. Megginson, Jr. Maurice B. Richardson.	:	•	•
ALTERNATES			
R. L. Bridger R. L. Smith	•		
FOURTH DISTRICT	•		
James H. Edwards Walter H. Finch, Jr. Penn Marshall, Jr. Harold E. Maxwell P. C. Purvis	•	:	•
ALTERNATES			
Lawrence A. Cameron			
FIFTH DISTRICT			
M. W. Aldridge T. S. Fleming Richard F. Hunt, Jr Walter S. Linville, Jr Thomas B. Reid, Jr	•	•	•
ALTERNATES			
W. L. Hand, Jr David H. Freshwater			•
TOTAL PRESENT	36	37	28

### General Sessions

SUNDAY, MAY 5, 1968 MONDAY, MAY 6, 1968 WEDNESDAY, MAY 8, 1968

### FIRST GENERAL SESSION

Sunday, May 5, 1968

Call to Order: The first general session of the 112th Annual Session of the North Carolina Dental Society was called to order by President George F. Kirkland, Jr. at 8:30 p.m., Sunday, May 5, 1968 in the Cardinal Ballroom of The Carolina, Pinehurst. D. W. Seifert, Jr. pronounced the invocation.

Necrology Service: Robert T. Byrd, Chairman, Necrology Committee, conducted a memorial service in memory of the following members who

died during the past year:

First District: Luther P. Baker, Kings Mountain, October 18, 1967; S. Fletcher Clayton, Hickory, October 28, 1967; A. C. Edwards, Shelby, January 24, 1968; Allen T. Lockwood, Asheville, December 25, 1967. Second District: P. C. Hull, Charlotte, August 5, 1967; James L. Keerans, Charlotte, June 1, 1967; Guy M. Masten, Winston-Salem, August 20, 1967; William C. Taylor, Salisbury, September 5, 1967; Ben H. Webston, Charlotte, September 1, 1967.

Webster, Charlotte, September 1, 1967.
Third District: Clarence N. Stone, Greensboro, September 27, 1967.
Fifth District: Hervey L. Civils, Kinston, June 6, 1967; Z. L. Edwards, Washington, April 26, 1968; Fabian Morgan, La Grange, June 8, 1967; Roland L. Whitehurst, Rocky Mount, April 16, 1968; Robert A. Wilkins. Mount Olive, September 26, 1967.

Introduction of Officers and Guests: President Kirkland introduced the

following:

Officers: Colin P. Osborne, Jr., Lumberton, president-elect; James H. Lee, Goldsboro, vice president; Claibourne W. Poindexter, Greensboro, secretary-treasurer; A. Breece Breland, Charlotte, editor-publisher; Ralph D. Coffey, Morganton, speaker of the house; Freeman C. Slaughter,

Kannapolis, parliamentarian.

Executive Committee: Frank G. Atwater, Greensboro, chairman;
J. Homer Guion, Charlotte; Lackey B. Peeler, Charlotte.

ADA officials: Hubert A. McGuirl, Providence, R.I., president-elect;
Arthur W. Kellner, Hollywood, Florida, Trustee, fifth district.

Officers of allied groups: Mrs. Shelby Brown, Raleigh, president, North
Carolina Dental Assistants Association; Mrs. Mozelle Comer, Norfolk, Virginia, president, American Dental Assistants Association; Mrs. Janelle Butler, Cayce, South Carolina, trustee, district four, American Dental Assistants Association; Mrs. Carolyn C. Williams, Raleigh, president,

North Carolina Dental Hygienists Association; Mrs. Etta Mae Wirt, Miami, Florida, trustee, district six, American Dental Hygienists Association; Mr. V. E. McCoy, Goldsboro, president, North Carolina Dental Laboratory Association; Mrs. David H. Freshwater, president, North Carolina Dental Auxiliary.

Other guests: Hume S. Powell, Richmond, Virginia, president, Virginia Dental Association; Dr. James W. Bawden, dean, University of North Carolina School of Dentistry.

**President's Report:** James H. Lee, vice president, assumed the chair and presented George F. Kirkland, Jr., president.

President Kirkland delivered his annual report to the Society.

Vice President Lee announced the appointment of the following to the Committee on the President's Address: Frank G. Atwater, chairman; Walter H. Finch, Jr., and C. B. Taylor.

President Kirkland resumed the chair.

Address by ADA President: Clyde E. Minges of Rocky Mount, a past president of the American Dental Association, introduced Hubert A. McGuirl, president-elect of the American Dental Association.

Dr. McGuirl complimented North Carolina on its progressive dental programs and commended three programs currently sponsored by the American Dental Association: (1) the American Dental Association's Dental Health Program for Children; (2) expanded use of auxiliary personnel; and (3) the proposed increase of ADA dues. He challenged North Carolina dentists to support these programs.

**Honorary Membership:** President Kirkland presented Dr. McGuirl with a certificate of honorary membership in the North Carolina Dental Society.

Dr. Frank G. Atwater bestowed the title of "Tar Heel" on Dr. McGuirl and presented him with a tar heel pin.

**Dental Foundation Report:** Dr. G. Shuford Abernethy of Hickory, president, Dental Foundation of North Carolina, Incorporated reviewed the activities of the Foundation during the past year, including the completion of the Dental Research Building and the breaking of ground for the new dental education wing. He thanked the members for their support of the Foundation.

Announcements: Baxter B. Sapp, Jr., of Durham, program chairman announced that the scientific program would include the following essayists: Dr. Rex Ingraham, Los Angeles; Dr. Frank T. Scott, Jacksonville, Florida; and Dr. John Ott, director, Environmental Health and Light Research Institute, Sarasota, Florida.

President Kirkland announced that Mr. H. F. "Chub" Seawell of Carthage would be the guest speaker at the banquet on Tuesday night, May 7.

He reminded the members that Dr. Guy R. Willis, president, North Carolina State Board of Dental Examiners would report on the Board's activities during the past year at the second general session on Monday night, May 6. He stated also that members of the Board would be available on Tuesday afternoon, May 7, from 2:00 p.m. to 4:30 p.m. for consultation in the Camellia Room of The Carolina.

At the request of A. Breece Breland, editor-publisher, President Kirkland asked all study clubs to report the following information to the Central Office: the name of the study club, the location by district or city, the officers and the purpose.

Mr. Cunningham, executive secretary, read a telegram from F. Darl Ostrander, president, American Dental Association, extending greetings

with and best wishes from Association officers and trustees to the North As Carolina Dental Society.

Mr. Cunningham announced that representatives of companies administering group insurance and retirement programs would be available for consultation during the entire meeting in the registration area.

The Executive Secretary reported that at 6:00 p.m. registration totalled

The Executive Secretary reported that at 6.00 p.m. registration for the first day of an annual session.

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Adjournment: The meeting was adjourned at approximately 10:00 p.m.

#### SECOND GENERAL SESSION

### Monday, May 6, 1968

Call to Order: The second general session of the 112th Annual Session of the North Carolina Dental Society was called to order by President George F. Kirkland, Jr., at 8:30 p.m. Monday, May 6, 1968 in the Cardinal Ballroom of The Carolina, Pinehurst. Walter H. Finch, Jr. pronounced the invocation.

Report of Board of Dental Examiners: Dr. Guy R. Willis, president, North Carolina State Board of Dental Examiners, explained some of the duties, obligations and functions of the Board and commented on the activities of Board during the past year.

Election of Officers: President Kirkland appointed the following to serve as tellers: C. W. Horton, chief, J. Harry Spillman, and Robert B.

Litton.

Claibourne W. Poindexter of Greensboro was nominated for the office of president-elect by C. W. Horton of High Point, seconded by James B. Howell of Greensboro and Elliot R. Motley of Charlotte. There being no further nominations, Dr. Poindexter was elected president-elect by acclamation on motion by Alton B. Bottoms of Charlotte, seconded by Horace P. Reeves, Jr. of Charlotte. Frank G. Atwater of Greensboro was nominated for the office of vice

president by J. T. Lasley of Greensboro, seconded by Norman F. Ross of Durham. There being no further nominations, Dr. Atwater was elected vice president by acclamation on motion by Moultrie H. Truluck of Asheville, seconded by Daniel U. Cregar, Jr. of Charlotte.

Livious D. Herring of Raleigh was nominated for the office of secretary-

treasurer by H. Royster Chamblee of Raleigh, seconded by Erbie M. Medlin of Aberdeen and J. Homer Guion of Charlotte. There being no further nominations, Dr. Herring was elected secretary-treasurer by acclamation on motion by S. Byron Towler of Raleigh, seconded by Cleon W. Sanders of Benson.

Ralph D. Coffey of Morganton was nominated to succeed himself as a delegate to the American Dental Association by C. C. Diercks of Morganton, seconded by Cleon W. Sanders of Benson. There being no further nominations, Dr. Coffey was elected a delegate to the American Dental Association for a term of 3 years by acclamation on motion by Norman F.

Ross of Durham, seconded by H. Royster Chamblee of Raleigh.

Pearce Roberts, Jr. of Asheville was nominated as a delegate to the American Dental Association to succeed C. C. Poindexter of Greensboro by Cecil A. Pless, Jr. of Asheville, seconded by Baxter B. Sapp, Jr. of Durham.

E. U. Austin of Charlotte was nominated as a delegate to the American Dental Association to succeed C. C. Poindexter of Greensboro by J. Homer Guion of Charlotte, seconded by Horace P. Reeves, Jr. of Charlotte.

By secret ballot Dr. Austin was elected a delegate to the American Dental Association for a term of 3 years.

Selection of Site for 1970: The executive secretary read letters from the Winston-Salem Chamber of Commerce and The Carolina, Pinehurst, inviting the Society to meet in these communities in 1970.

C. W. Poindexter, secretary-treasurer, announced that he had received that the had received that the had received that the secretary-treasurer announced that he had received that the had received that the secretary-treasurer announced that he had received that the had received that the secretary-treasurer announced that he had received that the secretary-treasurer announced that he had received that the secretary-treasurer announced that he had received the secretary-treasurer and the secretary-treasurer and the secretary-treasurer announced that he had received the secretary-treasurer and the secretar

a letter from the Jack Tar Hotel, Durham, inviting the Society to meet in Durham in 1970.

On motion by C. W. Poindexter, seconded by Walter E. Clark of Asheville, it was voted to hold the 114th annual session of the Society at D The Carolina, Pinehurst in 1970.

Succession of Officers: C. W. Poindexter urged the Society to conwould provide a continuity of leadership. He suggested that if a man proved capable as a secretary-treasurer then he should be advanced to vice president, president-elect, and president. This would give every president in the advantage of being thoroughly oriented in the affairs of the Society when he assumed office. He pointed out that it had been the custom in the past for a secretary-treasurer to serve three years before he was considered for the office of president-elect. This system, he said, was necessary to provide continuity, but it meant that only every fourth president had the advantage of experience in administering the affairs of the Society. He pointed out that the central office now provided the desired continuity and it was no longer necessary for a man to serve 3 terms as secretary-treasurer.

He noted that President-Elect Osborne had referred to this idea in his

remarks to the District Officers Conference.

Announcements: The executive secretary announced that registration

as of 5:00 p.m. totalled 1,813, including 677 members.

S. Byron Towler announced that because of illness, three past presidents were not able to be present for this annual session. On motion by Dr. Towler, seconded by Frank G. Atwater, it was voted to send telegrams to Drs. G. Fred Hale, R. M. Olive, and Wilbert Jackson noting their absence and extending the best wishes of the Society for a speedy recovery.

Adjournment: The meeting was adjourned at 10:30 p.m.

#### THIRD GENERAL SESSION

#### Wednesday, May 8, 1968

Call to Order: The third general session of the 112th Annual Session of the North Carolina Dental Society was called to order by President George F. Kirkland, Jr. at 11:30 a.m. Wednesday, May 8, 1968, in the Cardinal Ballroom of The Carolina, Pinehurst. John W. Girard, Jr. pronounced the invocation.

Report of Auxiliary Scrap Amalgam Drive: Mrs. Joel S. Williams, chairman, 1967-68 Scrap Amalgam Drive of the North Carolina Dental Auxiliary presented to President Kirkland a check for \$4,667.97 payable to the North Carolina Dental Society Relief Fund which represented the proceeds from the Auxiliary's 1967-68 Scrap Amalgam Drive. President Kirkland accepted the check with thanks and noted that since 1953 the Auxiliary had contributed over \$37,000 to the Relief Fund.

Report of Clinic Committee: Robert H. Gainey, chairman, Clinic Committee announced that six table clinics had been selected for presentation at the meeting of the American Dental Association in Miami Beach October 28-31, 1968. The list follows:

"Simple Office Procedure," William S. Prevost, Jr., Waynesville.
 "A New Approach to the Functional Generated Path," Robert W.

Holmes, Asheville.

3. "Temporary Bridge Technique," Keith L. Bentley, North Wilkesoro. "Amalgam Pin Technique," Eldon H. Parks and James A. Harrell,

ti Elkin.

5. "Reparative - Restorative Dentistry," Baxter B. Sapp, Jr., Durham. 6. "Cleft Palate Treatment," Galen W. Quinn and W. D. Abbey, Jr.,

7. "Closure of Oral Antral Fistula," W. Robert Caviness, Fayetteville.

(Alternate)

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8. "Aid to Orthodontic Diagnosis," Jack E. Silvers, Goldsboro. (Alernate)

Announcements: The executive secretary announced that registration for the 112th Annual Session totalled 2,219 as follows:

#### Members

First District	
Second District220	
Third District212	
Fourth District159	
Fifth District115	
Total members	805
Visiting dentists	141
Auxiliary	373
Exhibitors	166
Guests	286
Dental Hygienists	85
Dental Assistants	251
Students	73
Laboratory Technicians	39
Grand Total2	2,219

He noted that registration for this annual session topped all previous attendance records.

Installation of Officers: President Kirkland installed Colin P. Osborne, Jr. of Lumberton as president and as a delegate to the American Dental Association.

Dr. Osborne installed the following officers and delegates: President-Elect: Claibourne W. Poindexter, Greensboro

Vice President: Frank G. Atwater, Greensboro

Secretary-Treasurer: L. D. Herring, Raleigh (in absentia) Delegates to the American Dental Association: Ralph D. Coffey, Mor-

ganton, and Edward U. Austin, Charlotte.
Dr. Osborne announced that Dr. L. D. Herring could not be present for installation as secretary-treasurer because he had been hospitalized the previous day. He expressed the regret of everyone to Dr. Herring, his wife and children over his absence.

**Presidential Appointments:** President Osborne announced the following appointments:

Member of Executive Committee for a term of three years and chair-

man 1968-69: Joseph M. Johnson, Laurinburg.

Member of Executive Committee for a term of two years to fill the unexpired term of Frank G. Atwater who had been elected vice president: James H. Lee, Goldsboro.
Speaker of the House: Ralph D. Coffey, Morganton.

Adjournment: The 112th Annual Session was adjourned sine die at approximately 11:55 a.m.

# Directory 1968-1969

NORTH CAROLINA DENTAL SOCIETY OFFICERS AND COMMITTEES

STATE PRESIDENTS

N. C. DENTAL ASSISTANTS ASSOCIATION OFFICERS

N. C. DENTAL HYGIENISTS ASSOCIATION OFFICERS

N. C. DENTAL AUXILIARY OFFICERS

N. C. Dental Laboratory Association Officers

N. C. STATE BOARD OF DENTAL EXAMINERS

#### NORTH CAROLINA DENTAL SOCIETY 1968-1969

#### **OFFICERS**

President: Colin P. Osborne, Jr., P. O. Drawer 1344. Lumberton	28358
President-Elect: Claibourne W. Poindexter,	
309 East Wendover Avenue	27401
Vice President: Frank G. Atwater,	
1202 West Friendly Avenue	27403
Secretary-Treasurer: Joseph M. Johnson, 426 King St., Laurinburg	28352
Editor-Publisher: A. Breece Breland,	
1927 Brunswick Avenue Charlotte	28207
Associate Editor-Publisher: Barry G. Miller,	
1927 Brunswick Avenue Charlotte	28207
Speaker of the House: Ralph D. Coffey, P. O. Box 693. Morganton	28655
Executive Secretary: Andrew M. Cunningham,	
P. O. Box 11065Raleigh	27604

#### EXECUTIVE COMMITTEE

Chairman: James H. Lee (1970),	
308 North Taylor Street	27530
Lackey B. Peeler (1969),	
606 Doctors Building, 1012 Kings Drive	28207
George F. Kirkland, Jr. (1969), 913 Lamond Avenue. Durham	27701
C. Z. Candler (1971),	
Suite 1208, Northwestern Bank BuildingAsheville	28801

#### DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Erbie M. Medlin (1970), Chairman Edward U. Austin (1971) Ralph D. Coffey (1971) Paul E. Jones (1969) Roy L. Lindahl (1969) Colin P. Osborne, Jr. (1969)

# ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Frank G. Atwater Joseph M. Johnson James H. Lee A. Breece Breland George F. Kirkland, Jr. Claibourne W. Poindexter

#### STANDING COMMITTEES

ANNUAL SESSION: Frederick G. Hasty, General Chairman; J. Harry Spillman, Jack E. Silvers, C. R. VanderVoort, M. L. Cherry.

### Sub-Committees

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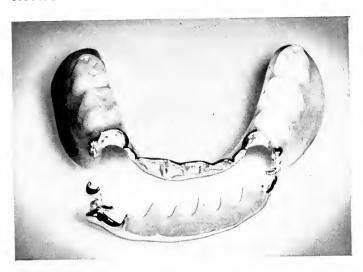


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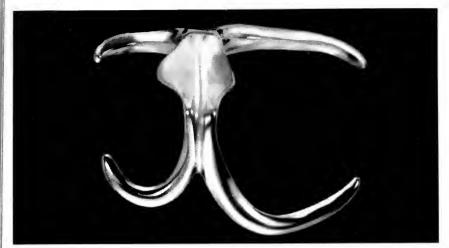
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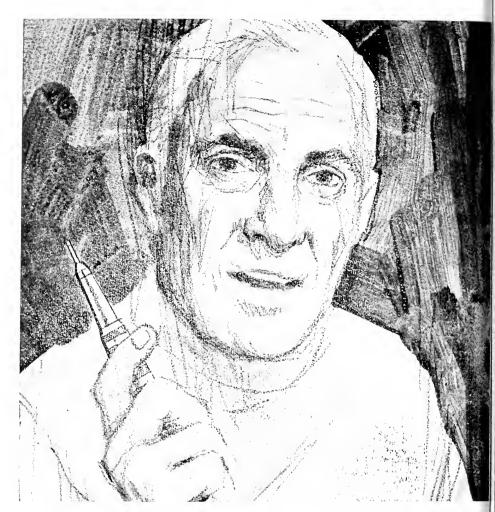
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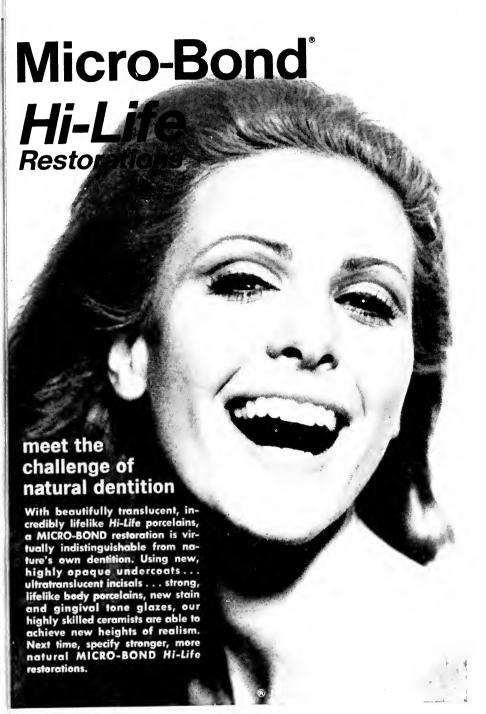
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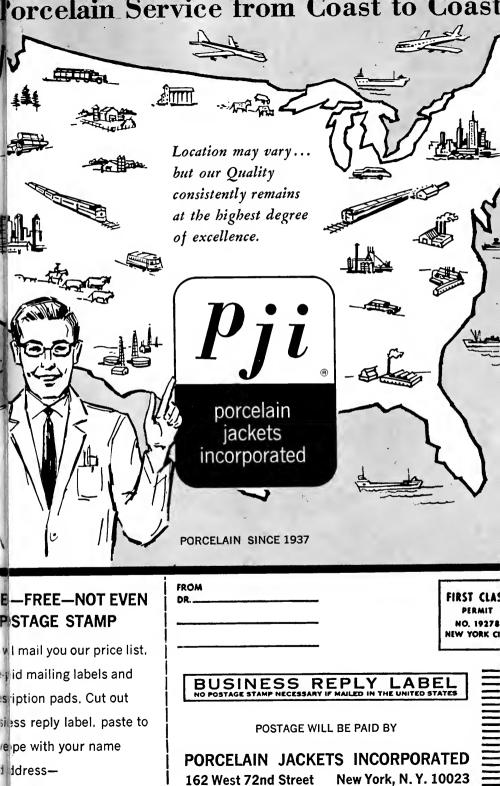
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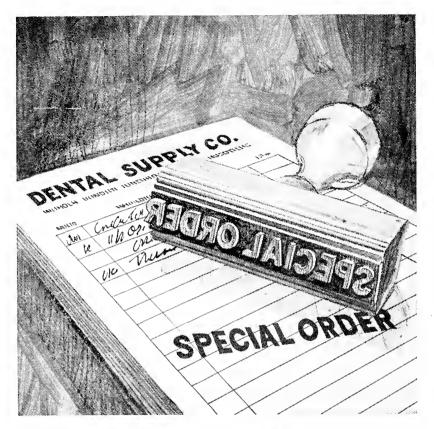
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